

Volume 27, Number 14  
Pages 1153-1244  
July 15, 2002



**MATT BLUNT**

**SECRETARY OF STATE**

# MISSOURI REGISTER

The *Missouri Register* is an official publication of the state of Missouri, under the authority granted to the secretary of state by sections 536.015 and 536.033, RSMo 2000. Reproduction of rules is allowed; however, no reproduction shall bear the name *Missouri Register* or "official" without the express permission of the secretary of state.

The *Missouri Register* is published semi-monthly by

**SECRETARY OF STATE**

**MAT T BLUNT**

**Administrative Rules Division**

James C. Kirkpatrick State Information Center  
600 W. Main  
Jefferson City, MO 65101  
(573) 751-4015

**DIRECTOR**

LYNNE C. ANGLE

**ADMINISTRATIVE STAFF**

SANDY SANDERS

PEGGY TALKEN

**EDITORS**

BARBARA McDUGAL

JAMES MCCLURE

**ASSOCIATE EDITORS**

CURTIS W. TREAT

SALLY L. REID

TIFFANY M. DAVIS

**PUBLISHING STAFF**

WILBUR HIGHBARGER

CARLA HERTZING

JOHN C. STEGMANN

ISSN 0149-2942, USPS 320-630; periodical postage paid at Jefferson City, MO  
Subscription fee: \$56.00 per year

POSTMASTER: Send change of address notices and undelivered copies to:

**MISSOURI REGISTER**  
Office of the Secretary of State  
Administrative Rules Division  
PO Box 1767  
Jefferson City, MO 65102

The *Missouri Register* and *Code of State Regulations* (CSR) are now available on the Internet. The Register address is <http://www.sos.state.mo.us/adrules/moreg/moreg.asp> and the CSR is <http://www.sos.state.mo.us/adrules/csr/csr.asp>. These web sites contain rulemakings and regulations as they appear in the Registers and CSR. These web sites do not contain the official copies of the Registers and CSR. The official copies remain the paper copies published by the Office of the Secretary of State pursuant to sections 536.015 and 536.031, RSMo 2000. While every attempt has been made to ensure accuracy and reliability, the Registers and CSR are presented, to the greatest extent practicable as they appear in the official publications. The Administrative Rules Division may be contacted by e-mail at [rules@sosmail.state.mo.us](mailto:rules@sosmail.state.mo.us).

The secretary of state's office makes every effort to provide program accessibility to all citizens without regard to disability. If you desire this publication in alternate form because of a disability, please contact the Division of Administrative Rules, PO Box 1767, Jefferson City, MO 65102, (573) 751-4015. Hearing impaired citizens should contact the director through Missouri relay, (800) 735-2966.



## IN THIS ISSUE:

### FROM THIS ANGLE . . . . .1157

#### EMERGENCY RULES

<b>Office of Administration</b>	
Commissioner of Administration . . . . .	1159
<b>Department of Agriculture</b>	
Weights and Measures . . . . .	1161
<b>Department of Labor and Industrial Relations</b>	
Division of Employment Security . . . . .	1162
<b>Department of Social Services</b>	
Division of Family Services . . . . .	1163
Division of Medical Services . . . . .	1165
<b>Department of Health and Senior Services</b>	
Division of Environmental Health and Communicable Disease Prevention . . . . .	1178

#### PROPOSED RULES

<b>Office of Administration</b>	
Commissioner of Administration . . . . .	1180
<b>Department of Conservation</b>	
Conservation Commission . . . . .	1182
<b>Department of Labor and Industrial Relations</b>	
Division of Employment Security . . . . .	1200
<b>Department of Revenue</b>	
State Tax Commission . . . . .	1202
<b>Department of Social Services</b>	
Division of Family Services . . . . .	1203
Division of Medical Services . . . . .	1206
<b>Department of Health and Senior Services</b>	
Division of Environmental Health and Communicable Disease Prevention . . . . .	1216

### ORDERS OF RULEMAKING

<b>Department of Economic Development</b>	
Missouri Dental Board . . . . .	1217
<b>Department of Transportation</b>	
Missouri Highways and Transportation Commission . . . . .	1217
<b>Department of Mental Health</b>	
Division of Mental Retardation and Developmental Disabilities . . . . .	1218
<b>Department of Natural Resources</b>	
Air Conservation Commission . . . . .	1219
<b>Department of Public Safety</b>	
Office of the Director . . . . .	1220
<b>Public Defender Commission</b>	
Office of State Public Defender . . . . .	1220
<b>Department of Health and Senior Services</b>	
Office of the Director . . . . .	1220

### IN ADDITIONS

<b>Department of Economic Development</b>	
Division of Credit Unions . . . . .	1222
<b>Department of Revenue</b>	
Director of Revenue . . . . .	1222

### DISSOLUTIONS . . . . .1223

### BID OPENINGS

<b>Office of Administration</b>	
Division of Purchasing . . . . .	1224

<b>RULE CHANGES SINCE UPDATE</b> . . . . .	1225
<b>EMERGENCY RULES IN EFFECT</b> . . . . .	1232
<b>REGISTER INDEX</b> . . . . .	1234

Register Filing Deadlines	Register Publication Date	Code Publication Date	Code Effective Date
April 1, 2002	May 1, 2002	May 31, 2002	June 30, 2002
April 15, 2002	May 15, 2002	May 31, 2002	June 30, 2002
May 1, 2002	June 3, 2002	June 30, 2002	July 30, 2002
May 15, 2002	June 17, 2002	June 30, 2002	July 30, 2002
June 3, 2002	July 1, 2002	July 31, 2002	August 30, 2002
June 17, 2002	July 15, 2002	July 31, 2002	August 30, 2002
July 1, 2002	August 1, 2002	August 31, 2002	September 30, 2002
July 15, 2002	August 15, 2002	August 31, 2002	September 30, 2002
August 1, 2002	September 3, 2002	September 30, 2002	October 30, 2002
August 15, 2002	September 16, 2002	September 30, 2002	October 30, 2002
August 30, 2002	October 1, 2002	October 31, 2002	November 30, 2002
September 16, 2002	October 15, 2002	October 31, 2002	November 30, 2002
October 1, 2002	November 1, 2002	November 30, 2002	December 30, 2002
October 15, 2002	November 15, 2002	November 30, 2002	December 30, 2002
November 1, 2002	December 2, 2002	December 31, 2002	January 30, 2003
November 15, 2002	December 16, 2002	December 31, 2002	January 30, 2003
December 2, 2002	January 2, 2003	January 29, 2003	February 28, 2003
December 16, 2002	January 16, 2003	January 29, 2003	February 28, 2003
January 2, 2003	February 3, 2003	February 28, 2003	March 30, 2003
January 16, 2003	February 18, 2003	February 28, 2003	March 30, 2003

Documents will be accepted for filing on all regular workdays from 8:00 a.m. until 5:00 p.m. We encourage early filings to facilitate the timely publication of the *Missouri Register*. Orders of Rulemaking appearing in the *Missouri Register* will be published in the *Code of State Regulations* and become effective as listed in the chart above. Advance notice of large volume filings will facilitate their timely publication. We reserve the right to change the schedule due to special circumstances. Please check the latest publication to verify that no changes have been made in this schedule. To review the entire year's schedule, please check out the web site at <http://www.sos.state.mo.us/adrules/pubsched.asp>

# Missouri Depository Libraries

The *Missouri Register* and the *Code of State Regulations*, as required by the Missouri Depository Documents Law (section 181.100, RSMo 2000), are available in the listed depository libraries, as selected by the Missouri State Library:

Jefferson County Library PO Box 1486, 3021 High Ridge High Ridge, MO 63049-1486 (314) 677-8689	Learning Resources Center Mineral Area College PO Box 1000 Park Hills, MO 63601-1000 (573) 431-4593	Missouri Western State College Hearnes Learning Resources Ctr. 4525 Downs Drive St. Joseph, MO 64507-2294 (816) 271-5802	Library University of Missouri-Rolla 1870 Miner Circle Rolla, MO 65409-0060 (573) 341-4007
Jefferson College Library 1000 Viking Drive Hillsboro, MO 63050-2441 (314) 789-3951	Cape Girardeau Public Library 711 N. Clark Cape Girardeau, MO 63701-4400 (573) 334-5279	Library North Central Missouri College PO Box 111, 1301 Main Street Trenton, MO 64683-0107 (660) 359-3948	Kinderhook Regional Library 135 Harwood Ave. Lebanon, MO 65536-3017 (417) 532-2148
St. Louis Public Library 1301 Olive St. St. Louis, MO 63103-2389 (314) 539-0376	Kent Library Southeast Missouri State University One University Plaza Cape Girardeau, MO 63701-4799 (573) 651-2757	Missouri Southern State College Spiva Library 3950 East Newman Road Joplin, MO 64801-1595 (417) 625-9770	ESTEP Library Southwest Baptist University 1601 S. Springfield Street Bolivar, MO 65613-2597 (417) 326-5281
St. Louis University Law Library 3700 Lindell Blvd. St. Louis, MO 63108-3478 (314) 977-2756	Riverside Regional Library PO Box 389, 204 South Union St. Jackson, MO 63755-0389 (573) 243-8141	Missouri State Library 600 West Main, PO Box 387 Jefferson City, MO 65102-0387 (573) 751-3075	Barry-Lawrence Regional Library 213 6th St. Monett, MO 65708-2147 (417) 235-6646
Eden Theological Seminary/ Webster University Eden/Webster Library 475 East Lockwood Ave. St. Louis, MO 63119-3192 (314) 961-2660	Rutland Library Three Rivers Community College 2080 Three Rivers Blvd. Poplar Bluff, MO 63901-2393 (573) 840-9656	Missouri State Archives 600 West Main, PO Box 778 Jefferson City, MO 65102-0778 (573) 526-6711	Lyons Memorial Library College of the Ozarks General Delivery Point Lookout, MO 65726-9999 (417) 334-6411
Thomas Jefferson Library University of Missouri-St. Louis 8001 Natural Bridge Road St. Louis, MO 63121-4499 (314) 516-5084	Ward Edwards Library Central Missouri State University 142 Edwards Library Warrensburg, MO 64093-5020 (660) 543-4149	Elmer Ellis Library University of Missouri-Columbia 104 Ellis Library Columbia, MO 65211-5149 (573) 882-6733	West Plains Campus Library Southwest Missouri State University 123 N. Minnesota West Plains, MO 65775-3414 (417) 256-9865
Washington University Washington University Law Library Campus Box 1171, Mudd Bldg., One Brookings Dr. St. Louis, MO 63130-4899 (314) 935-6484	Kansas City Public Library 311 East 12th St. Kansas City, MO 64106-2454 (816) 701-3400	Library State Historical Society of Missouri 1020 Lowry St. Columbia, MO 65201-7298 (573) 882-7083	Springfield-Greene County Library PO Box 737, 397 E. Central Springfield, MO 65801-0760 (417) 869-4621
St. Louis County Library 1640 S. Lindbergh Blvd. St. Louis, MO 63131-3598 (314) 994-3300	Law Library University of Missouri-Kansas City 5100 Rockhill Road Kansas City, MO 64110-2499 (816) 235-2438	Daniel Boone Regional Library PO Box 1267, 100 West Broadway Columbia, MO 65205-1267 (573) 443-3161	Meyer Library Southwest Missouri State University PO Box 175, 901 S. National Springfield, MO 65804-0095 (417) 836-4533
Maryville University Library 13550 Conway Road St. Louis, MO 63141-7232 (314) 529-9494	University of Missouri-Kansas City Miller Nichols Library 5100 Rockhill Road Kansas City, MO 64110-2499 (816) 235-1281	School of Law University of Missouri-Columbia 224 Hulston Hall Columbia, MO 65211-0001 (573) 882-1125	
St. Charles City-County Library Middendorf-Kredell Branch 2750 Hwy K O'Fallon, MO 63366-7859 (314) 978-7997	B.D. Owens Library Northwest Missouri State University 800 University Drive Maryville, MO 64468-6001 (660) 562-1841	Central Methodist College Smiley Memorial Library 411 Central Methodist Square Fayette, MO 65248-1198 (660) 248-6292	
Truman State University Pickler Memorial Library 100 E. Normal Kirksville, MO 63501-4221 (660) 785-7416	River Bluffs Regional Library 927 Felix Street St. Joseph, MO 64501-2799 (816) 232-8151		

## HOW TO CITE RULES AND RSMo

**RULES**—Cite material in the *Missouri Register* by volume and page number, for example, Vol. 26, *Missouri Register*, page 27. The approved short form of citation is 26 MoReg 27.

The rules are codified in the *Code of State Regulations* in this system—

Title	Code of State Regulations	Division	Chapter	Rule
1	CSR	10-	1.	010
Department		Agency, Division	General area regulated	Specific area regulated

They are properly cited by using the full citation , i.e., 1 CSR 10-1.010.

Each department of state government is assigned a title. Each agency or division in the department is assigned a division number. The agency then groups its rules into general subject matter areas called chapters and specific areas called rules. Within a rule, the first breakdown is called a section and is designated as (1). Subsection is (A) with further breakdown into paragraph 1., subparagraph A., part (I), subpart (a), item I. and subitem a.

**RSMo**—Cite material in the RSMo by date of legislative action. The note in parentheses gives the original and amended legislative history. The Office of the Revisor of Statutes recognizes that this practice gives users a concise legislative history.



## **FROM THIS ANGLE...**

### **Rule Tips**

Please watch the back page of the *Missouri Register* for our "top ten" list of rulemaking tips — these are being placed on upcoming editions of the *Register* to assist you, our rulemakers!

Please call or e-mail us at [www.rules@sosmail.state.mo.us](mailto:www.rules@sosmail.state.mo.us) if you have any tips you would like to share with us!

### **Rulemaking 1-2-3, Missouri Style Classes**

We enjoyed teaching our latest class on the proper steps and procedures to rulemaking at the offices of the Division of Professional Registration. Remember, if your agency needs assistance on the proper procedures for rulemaking — or if we may assist you in making this process smoother for your agency please contact us to schedule your class. Our schedule is filling up — but we still have a few openings.

Additionally, if you do not have your *new* rulemaking manual, we still have a few copies available. Contact us to receive your copy.

### **Still Needing your Thoughts...**

As we look toward the future and automating our process, we have discussed the possibility of publishing the *Missouri Register* in electronic copy *only*. We respectfully request your input in this regard! What potential problems, if any, would it pose for your agency or for you personally, to have the *Missouri Register* available in *ONLY* electronic copy on our website? Drop us an e-mail or give us a call regarding this subject.

**Thank you!**

We would like to thank Connie Clarkston from the Department of Economic Development, Division of Professional Registration, for sharing of her time, input, and talents to assist us as an agency representative on our process of gathering information to formulate an RFP to automate the process of administrative rules. Connie has offered valuable assistance from an agency perspective to this committee. Thank you, Connie!

**E-Mail Notification Service**

In a previous edition of **From this Angle**, we inquired of your level of interest in an e-mail notification service (you would be notified *via* e-mail when a specific topic or subject matter has been addressed by a rulemaking filed with our office). Do you feel this service would be beneficial to you or your agency? We also would appreciate hearing from you in this regard.

Please contact us if we may assist you in any way with the rulemaking process.

A handwritten signature in cursive script, appearing to read "Lynne C. Angle".

Lynne C. Angle  
Director, Administrative Rules

**R**ules appearing under this heading are filed under the authority granted by section 536.025, RSMo 2000. An emergency rule may be adopted by an agency if the agency finds that an immediate danger to the public health, safety or welfare, or a compelling governmental interest requires emergency action; follows procedures best calculated to assure fairness to all interested persons and parties under the circumstances; follows procedures which comply with the protections extended by the *Missouri* and the *United States Constitutions*; limits the scope of such rule to the circumstances creating an emergency and requiring emergency procedure, and at the time of or prior to the adoption of such rule files with the secretary of state the text of the rule together with the specific facts, reasons and findings which support its conclusion that there is an immediate danger to the public health, safety or welfare which can be met only through the adoption of such rule and its reasons for concluding that the procedure employed is fair to all interested persons and parties under the circumstances.

**R**ules filed as emergency rules may be effective not less than ten (10) days after filing or at such later date as may be specified in the rule and may be terminated at any time by the state agency by filing an order with the secretary of state fixing the date of such termination, which order shall be published by the secretary of state in the *Missouri Register* as soon as practicable.

**A**ll emergency rules must state the period during which they are in effect, and in no case can they be in effect more than one hundred eighty (180) calendar days or thirty (30) legislative days, whichever period is longer. Emergency rules are not renewable, although an agency may at any time adopt an identical rule under the normal rulemaking procedures.

## Title 1—OFFICE OF ADMINISTRATION Division 10—Commissioner of Administration Chapter 11—Travel Regulations

### EMERGENCY AMENDMENT

**1 CSR 10-11.010 State of Missouri Travel Regulations.** The Office of Administration is amending sections (3), (15), (17) and (19), deleting section (10) and renumbering the remaining sections accordingly.

*PURPOSE: These amendments reflect a change to the travel regulations for meal reimbursements and travel outside the state by privately-owned automobiles in lieu of air that could result in savings to the state.*

*EMERGENCY STATEMENT: The Office of Administration finds a compelling governmental interest, which requires this emergency action. This emergency amendment is necessary to increase accountability and savings to the state at a time when the state is experiencing a significant budget shortfall. Savings as a result of this emergency amendment are needed to help address the budget shortfall. Due to the performance audit from the Office of State Auditor, dated September 25, 2001, state agencies are already aware of the recommended changes that are now being adopted. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections*

*extended in the Missouri and United States Constitutions. The Office of Administration believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 20, 2002, effective July 1, 2002, and expires February 27, 2003.*

(3) Officials and employees will be allowed travel expenses when required to travel away from their official domicile on state business. *[In instances where employees incur breakfast or evening meals when leaving and returning to their official domicile, they should indicate on their expense report that an early departure or late arrival was required to conduct state business.] To qualify for reimbursement for meal(s), officials and employees must be in continuous travel status for twelve (12) hours or more. Officials and employees shall indicate on their expense report the twelve (12)-hour status, if no overnight lodging is listed.* Mileage reimbursement for official use of a private motor vehicle may be claimed within the official domicile.

*[(10) In certain situations (as in the metropolitan areas of Kansas City, St. Joseph, St. Louis and Springfield) where it is clearly economical or advantageous to the state, the Office of Administration may authorize reimbursement for meals for employees traveling on state business in the area, regardless of the location of their official domicile. Generally, this will include the noon meal only. This shall apply only to employees who by the nature of their jobs are required to travel and are reimbursed while on state business in their official domicile.]*

*[(11)] (10) State employees and officials may be reimbursed for travel expenses incurred for other employees or nonemployees provided the specific business reason necessary for doing so is indicated along with the names of those involved. This is intended to be used for those common types of travel situations where it is normal and practical for one (1) individual to pay for an expense rather than be divided among all individuals. Examples may be a restaurant bill or hotel charge for which a room was shared. Reimbursement for spouse expenses at an official business function requires a written justification preapproved by the commissioner of administration. This reimbursement is limited to elected officials, judges and department directors or those designated to represent them and must be for a legitimate business reason where attendance of the spouse is required to represent the state. State employees and officials may be reimbursed for expenses incurred by their spouses or other members of their families only as provided for concerning transportation to and from the airport in section (9) ((travel rule) (9)), relocation expenses in section [(20)] (19) ((travel rule) [(20)] (19)) and representing the state at an official business function in section [(11)] (10) ((travel rule) [(11)] (10)).*

*[(12)] (11) The following rules shall apply for allowances for travel in privately-owned automobiles, privately-owned and rented aircraft, and aircraft charters:*

(A) For travel in privately-owned automobiles, the state mileage allowance shall be at the current rate ordered by the commissioner of administration pursuant to section 33.095, RSMo. Any changes to the mileage allowance rate will be effective on July 1. Contact your agency fiscal office for the current authorized rate. Mileage figures listed on the Monthly Expense Report Form shall be rounded to the nearest whole mile. Toll charges for bridges and turnpikes as well as parking charges will also be allowed. When more than one (1) person travels in the same automobile, only the owner of the vehicle shall be allowed mileage. The state

mileage allowance rate represents full compensation for the costs of operating your vehicle. Physical damage or loss to your private vehicle and/or its personal property contents is not covered by the state. Coverage should be obtained through personal auto insurance. Liability to others, including passengers, must be covered by your private auto policy. Refer to your policy or contact your agent for coverage specifics concerning use of your private vehicle for business activities;

(B) For travel in privately-owned or rented aircraft, the employee shall be reimbursed a mileage allowance at a rate of twenty-four and one-half cents (24 1/2¢) per mile. The mileage shall be determined by the number of air miles. When more than one (1) person travels in the same aircraft, only the employee who owned or rented the aircraft shall receive the mileage allowance;

(C) For travel in a chartered aircraft (chartered from a nonaffiliated party and piloted by the charter service), prior authorized approval shall be obtained from the Office of Administration. That approval shall be limited to a reasonable rate based upon the mileage and size of the aircraft needed. When submitted as a reimbursement request, proper receipts shall be attached to the expense report; and

(D) For travel by rented auto, the employee will be reimbursed the actual cost of the rental plus fuel. Direct billing is not allowed. Weekly car rental rates will be allowed if the cost is less than the total cost of renting at the daily rate. The State Legal Expense Fund provides liability coverage for the usage of rental vehicles for official state business. For that reason, employees will not be reimbursed for any car rental insurance incurred. Usage of rental vehicles for personal activities is not covered by the Legal Expense Fund. Employees must provide at their own expense insurance coverage for personal use of rental vehicles. The Office of Administration Risk Management Section publishes a *Guide for Drivers on State Business* which describes procedures to follow should an accident occur.

**[[13]] (12)** The following rules shall apply for allowances for travel in state-owned vehicles:

(A) Expenses for gasoline, oil, storage, washing, greasing and other necessary services will be allowable as long as proper receipts are attached to the expense report;

(B) Charges for garaging state-owned vehicles shall be allowable for officials and employees at their official domicile providing—

1. That the state has no available facilities for garaging;
2. That the garage used is not owned by the employee or immediate family;
3. That the cost of the garage rental is not included in the rental charge for the living quarters of the state official or employee; and
4. That storage is reasonable in amount, necessary and to the advantage of the state; and

(C) State-issued credit cards for state-owned vehicles shall be used with those companies that have agreed to accept the credit cards. Payments to oil companies covering credit card purchases should be listed on the warrant request. These payments must be supported by the statement received from the company and accompanied by gasoline purchase charge slips. Gasoline purchases with state credit cards will not be listed on the expense report.

**[[14]] (13)** An officer or employee whose resident city is in some place other than the city of the official domicile shall not be allowed expenses while in such resident city or mileage to travel between the resident city and the city of the official domicile. Reimbursement may be made for a meal charge within the city of residence if incurred as part of a department or agency sponsored conference or business meeting as described in section **[[15]] (14)** ((travel rule) **[[15]] (14)**). Travel expenses shall be reimbursed and computed between the travel site destination and the employee's

official domicile or residence, if leaving directly from the residence, whichever is less. Any additional travel expenses incurred by reason of an employee or official choosing to reside in a place other than the city of the official domicile is not allowed. The city/town or place of official domicile must be listed on the monthly expense report.

**[[15]] (14)** No official or employee shall be allowed hotel or meals while in their city of official domicile, except as provided in *[section (10) ((travel rule) (10)) and]* this section **[[15]] (14)** ((travel rule) **[[15]] (14)**). While traveling on state business, employees and officials will not be allowed hotel expenses when it would be more economical and advantageous to the state to return to their residence. Reimbursement or direct billing may be made for agency-provided meal expenses within the city of official domicile when it is incurred as part of a department or agency required meeting or a department sponsored conference. This represents meals served to officers and employees at conferences and meetings who are interacting and conducting state business during the meal period. Direct billing and reimbursement of meals served in conjunction with agency required meetings attended by in-domicile employees shall be documented with the names of those involved or the group name with the number attending and the specific state business reason for the meeting. The state business reason can be documented in the form of an agenda, program, or other specific description.

**[[16]] (15)** The following procedures will be utilized in submitting claims for reimbursement:

(A) All claims must be prepared on a typewriter or in ink. The original shall be filed with the Office of Administration;

(B) Descriptive invoices for lodging, conference registration, airline/air charter, bus and rail transportation billed directly to the state must be submitted on a warrant request with a copy of an approved Out of State Travel Authorization Form, if applicable, attached to each invoice;

(C) Where charges for transportation, lodging, and conference registrations are not billed directly to the state, the following documentation is required for reimbursement:

1. Reimbursement for transportation must be supported by a vendor document describing the travel and a proof of payment;
2. Reimbursement for lodging must be supported with a hotel document indicating the lodging specifics and a proof of payment;
3. Reimbursement for conference registrations must be supported by a descriptive vendor document and a proof of payment;
4. Proof of payment may be in the form of a vendor receipt or a vendor marking on the invoice document that the charge has been paid. Proof of payment may also be in the form of a credit card receipt, credit card statement copy showing the charge, or a copy of a personal check that has been canceled by the bank; and
5. Fiscal personnel must verify that travel reimbursement claims are correct before submitting the claim to the Office of Administration. Primary responsibility for authenticating travel reimbursement claims rests with the department and agency directors;

(D) Any unusual expenses incurred shall be itemized on the expense report and accompanied by receipts for payment. The justification for incurring any unusual expenses shall be fully explained by letter or notation on the expense report form;

(E) Each monthly expense report shall be limited to cover expenses incurred during a one (1)-month period. The Office of Administration will not accept more than one (1) monthly expense report per individual per month. The expense reports must be rendered currently to facilitate prompt payment;

(F) Rubber stamps or facsimile signatures for the claimant on the expense report form shall not be honored unless otherwise provided by state law; and



(G) All claims for reimbursement of expenses must be itemized and attested to by the claimant and approved by the director of the department or as otherwise provided by state law.

*[[17]]* (16) The following additional rules shall apply to all travel outside the state that is necessary for the performance of official state business:

(A) All travel outside the state requires approval by the director, head of the department or their authorized representative. This rule shall not apply to members of the legislature or other legislative branch employees, judges and other judicial branch employees and elected officials of the executive branch and their employees;

(B) A copy of the approved Out of State Travel Authorization Form bearing the signature of the director, head of the department or his/her authorized representative shall be attached to the expense report for reimbursement for travel expenses incurred outside the state. The Out of State Travel Authorization Form must be the form approved by the Office of Administration and include, but not be limited to, the following information: name(s) of employee(s), destination, purpose of the trip, dates of travel, manner of transportation and estimated total expenses;

(C) Agencies shall include on one (1) Out of State Travel Authorization Form the names of all individuals requesting travel to the same place at the same date and for the same purpose. In these instances each employee must secure a copy of the authorization for submission with the monthly expense report; and

(D) Air travel shall be the primary method of transportation outside of the state unless other methods of travel are more economical or advantageous to the state. State agencies should plan their out of state travel by making advance air travel reservations to obtain the lowest convenient air fares. Air travel shall not, however, exceed coach fare for the most direct available route. Travel outside the state by commercial common carrier surface transportation, in lieu of air transportation, shall be limited to the actual cost of the surface carrier. *[Travel outside the state by privately-owned automobile, in lieu of air transportation, shall be limited to the state mileage allowance. The total mileage allowance cannot, however, exceed the highest cost coach air fare available at that time to the same destination. No meals, lodging or other travel expenses incurred as a result of taking surface transportation, in lieu of air, will be allowed.]* Travel outside the state by privately-owned automobile, in lieu of air transportation, shall be limited to the state mileage allowance plus any actual expenses which would have been allowed or provided if taking air transportation. The total allowable expenses cannot, however, exceed the reasonable coach airfare available at that time to the same destination. Travel outside of the state by rented automobile or state car, in lieu of air transportation, shall be limited to the cost of the rented car and necessary fuel. The Office of Administration may require a written justification for extensive travel out of state by privately-owned auto when the mileage allowance cost does not appear economical or advantageous to the state.

*[[18]]* (17) State department directors are authorized to promulgate and enforce regulations governing travel. Departmental regulations may be more restrictive than these regulations. Departmental regulations shall not grant expenses that are not allowed under the State of Missouri Travel Regulations.

*[[19]]* (18) The commissioner of administration or an authorized representative may approve unusual travel expenses not covered by these regulations or modify procedures for the payment of travel expenses. **The commissioner of administration may make exceptions to any of these regulations deemed appropriate and in the best interests of the state.** The *[need]* request for reim-

bursement of **exception travel expenses**, or of unusual travel expenses shall be made in writing to the Office of Administration.

*[[20]]* (19) Reimbursement for recruiting and relocation expenses for new or existing employees and their families will be made in accordance with the applicable department's policy. Before submitting any recruiting or relocation expenses, departments desiring to pay such expenses shall submit their policies to the commissioner of administration for approval. If a department does not submit a policy for approval, those expenses shall be paid based upon the Office of Administration employee relocation policy distributed to each department.

*AUTHORITY: section 33.090, RSMo [Supp. 1995] 2000. Original rule filed Jan. 22, 1974, effective Feb. 1, 1974. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003. A proposed rule covering this same material is published in this issue of the Missouri Register.*

## **Title 2—DEPARTMENT OF AGRICULTURE**

### **Division 90—Weights and Measures**

#### **Chapter 10—Liquefied Petroleum Gases**

#### **EMERGENCY AMENDMENT**

**2 CSR 90-10.040 NFPA Manual No. 58, Storage and Handling of Liquefied Petroleum Gases.** The department is adding section (9).

*PURPOSE: The purpose of this amendment is to move the effective date of the overfill prevention device (OPD) requirement from June 30, 2002 to December 15, 2002.*

*EMERGENCY STATEMENT: The current demand for overfill prevention devices (OPDs) for propane cylinders is much greater than manufacturers can produce. The inability to obtain overfill prevention devices by June 30, 2002 will place propane retailers and consumers in violation of the OPD requirement. Propane retailers have commented that unless they can obtain OPDs prior to the June 30, 2002 deadline, or there is a change in the effective date of the OPD requirement, they have been advised by their legal counsel to cease cylinder filling operations. This will have a tremendous impact on the economic well being of the propane industry while also affecting the consumers ability to have their propane cylinders filled that are utilized for barbecue grills, recreational vehicles, etc. This emergency rule will delay the effective date of the OPD requirement, assist manufacturers in meeting the demand for OPDs in a legal and orderly manner and allow propane retailers and consumers to remain compliant. The Department of Agriculture believes this emergency rule is fair and equitable to all affected persons and parties. Emergency amendment filed June 20, 2002 effective June 30, 2002, expires Dec. 30, 2002.*

**(9) The effective date of the requirement relating to overfill protection devices in sections 2.3.1.5(a) (b) (c) and (d) of the 2001 edition of the National Fire Protection Association Manual 58 shall be postponed from June 30, 2002 until December 15, 2002.**

*AUTHORITY: sections 261.023.6 and 323.020, RSMo 2000. Original rule filed Jan. 24, 1968, effective Feb. 3, 1968. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective June 30, 2002, expires Dec. 30, 2002.*

**Title 8—DEPARTMENT OF LABOR AND  
INDUSTRIAL RELATIONS  
Division 10—Division of Employment Security  
Chapter 4—Unemployment Insurance**

**EMERGENCY RULE**

**8 CSR 10-4.180 Coverage of Indian Tribes**

*PURPOSE: This rule implements the federally mandated coverage of Indian tribes under the Missouri Employment Security Law, Chapter 288, RSMo.*

*EMERGENCY STATEMENT: This rule implements federally mandated coverage of Indian tribes under the Missouri Employment Security Law. On December 21, 2000, President Clinton signed the Consolidated Appropriations Act (CAA) of 2001. The CAA amended federal law to change the way federally recognized Indian tribes are treated under the Federal Unemployment Tax Act (FUTA). Indian tribes are now treated similarly to state and local governments. The CAA amendments became effective December 21, 2000, and states are required to incorporate these federal provisions into their unemployment insurance programs by July 1, 2002.*

*If Missouri fails to incorporate these federal provisions concerning coverage of Indian tribes into its unemployment insurance program, the state will be out of conformity with federal law and the Secretary of the United States Department of Labor could withhold annual certification of the state's unemployment insurance program. As a result of such action by the Secretary of the United States Department of Labor, Missouri employers would lose their credits against their federal unemployment tax liabilities. The state of Missouri could also lose federal grants to administer its unemployment insurance program, and its employment services and employee training programs. Additionally, the state of Missouri could lose its ability to borrow from the federal government to maintain the solvency of state's unemployment compensation trust fund. Currently, the state of Missouri does not have sufficient general revenue to compensate for this loss of federal funding. Therefore, if the Secretary of the United States Department of Labor withheld certification of Missouri's unemployment insurance program, this vital program would cease to function. Unemployed Missouri workers would not receive needed unemployment benefit payments and Missouri employers would pay millions of dollars in additional federal unemployment taxes.*

*This rule must be implemented immediately to avoid decertification of the Missouri unemployment insurance program by the United States Secretary of Labor. As a result, the Division of Employment Security finds an immediate danger to the public health, safety and/or welfare and a compelling governmental interest. A proposed rule, which covers the same material, is published in this issue of the **Missouri Register**. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the **Missouri and United States Constitutions**. The Division of Employment Security believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed June 13, 2002, effective July 1, 2002, and expires December 27, 2002.*

(1) Definitions. As used in this rule, except as otherwise required for the content, the following terms shall have the meanings ascribed:

(A) Director—The administrative head of the Division of Employment Security.

(B) Division—The Division of Employment Security.

(C) Indian tribe—The meaning given to such term in section 3306 of the Federal Unemployment Tax Act (26 U.S.C. 3306).

(D) Employer—Includes any Indian tribe for which service in employment as defined in section 288.034, RSMo is performed.

(E) Employment—Includes service performed in the employ of an Indian tribe, provided such service is excluded from employment as defined in the Federal Unemployment Tax Act solely by reason of section 3306(c)(7) of the Federal Unemployment Tax Act, and is not otherwise excluded from employment under Chapter 288, RSMo. For purposes of this rule, the exclusions from employment in subsection 9 of section 288.034, RSMo shall be applicable to services performed in the employ of an Indian tribe.

(2) Benefits. Benefits based on service in employment of an Indian tribe shall be payable in the same amount, on the same terms and subject to the same conditions as benefits payable on the basis of other service subject to Chapter 288, RSMo. The provisions of subsection 3 of section 288.040, RSMo pertaining to services performed at an educational institution while in the employ of an "educational service agency" shall apply to services performed in an educational institution or educational service agency wholly owned and operated by an Indian tribe or tribal unit.

(3) Contributions. Indian tribes or tribal units (subdivisions, subsidiaries or business enterprises wholly owned by such Indian tribes) subject to this chapter shall pay contributions under the same terms and conditions as all other subject employers, unless they elect to pay into the state unemployment fund amounts equal to the amount of benefits attributable to service in the employ of the Indian tribe. An Indian tribe and all tribal units of such Indian tribe shall be jointly and severally liable for any and all contributions, payments in lieu of contributions, interest, penalties, and surcharges owed by the Indian tribe and all tribal units of such Indian tribe.

(4) Payments in Lieu of Contributions. Indian tribes electing to make payments in lieu of contributions must make such election in the same manner and under the same conditions as provided in subsection 3 of section 288.090, RSMo pertaining to state and local governments and nonprofit organizations subject to Chapter 288, RSMo. Indian tribes will determine if reimbursement for benefits paid will be elected by the tribe as a whole, by individual tribal units, or by combinations of individual tribal units. Termination of an Indian tribe's coverage pursuant to subsection (C) of this section shall terminate the election of such Indian tribe and any tribal units of such Indian tribe to make payments in lieu of contributions.

(A) Indian tribes or tribal units will be billed for the full amount of benefits attributable to service in the employ of the Indian tribe or tribal unit on the same schedule as other employing units that have elected to make payments in lieu of contributions.

(B) Any Indian tribe or tribal unit that elects to become liable for payments in lieu of contributions shall be required, prior to the effective date of its election, to post with the division a surety bond issued by a corporate surety authorized to do business in Missouri in an amount equivalent to the contributions or payments in lieu of contributions for which the Indian tribe or tribal unit was liable in the last calendar year in which it accrued contributions or payments in lieu of contributions, or one hundred thousand dollars (\$100,000), whichever amount is the greater, to ensure prompt payment of all contributions or payments in lieu of contributions, interest, penalties and surcharges for which the Indian tribe or tribal unit may be, or becomes, jointly and severally liable pursuant to this chapter.

(C) Failure of the Indian tribe or tribal unit to maintain the required surety bond, including the posting of an additional surety bond or a replacement surety bond within ninety (90) days of being directed by the division, will cause services performed for such Indian tribe to not be treated as "employment" for purposes of Chapter 288, RSMo.

(D) The director may determine that any Indian tribe that loses coverage under subsection (C) of this section, may have services performed for such tribe again included as "employment" for

purposes of Chapter 288, RSMo if all contributions, payments in lieu of contributions, penalties, interest, and surcharges have been paid. Upon reinstatement of coverage under this subsection, an Indian tribe or any tribal unit may elect, in accordance with the provisions of this section, to make payments in lieu of contributions.

(E) If an Indian tribe fails to maintain the required surety bond by posting an additional surety bond or a replacement surety bond within ninety (90) days of being directed by the division, the director will immediately notify the United States Internal Revenue Service and the United States Department of Labor.

(F) Notices of surety bond deficiency to Indian tribes or their tribal units shall include information that failure to post an additional surety bond or a replacement surety bond within the prescribed time frame will cause:

1. The Indian tribe to be liable for taxes under the Federal Unemployment Tax Act;

2. The Indian tribe to be excepted from the definition of "employer," as provided in section (1) of this rule, and services in the employ of the Indian tribe, as provided in section (1) of this rule, to be excepted from "employment."

(5) Failure to Make Payments. Failure of the Indian tribe or tribal unit to make any payments required in Chapter 288, RSMo, including assessments of interest and penalty, within ninety (90) days of receipt of the bill will cause services performed for such Indian tribe to not be treated as "employment" for purposes of Chapter 288, RSMo.

(A) The director may determine that any Indian tribe that loses coverage under this section, may have services performed for such tribe again included as "employment" for purposes of Chapter 288, RSMo if all contributions, payments in lieu of contributions, penalties, interest, and surcharges have been paid.

(B) If an Indian tribe fails to make required payments (including assessments of interest and penalty) within ninety (90) days of a final notice of delinquency, the director will immediately notify the United States Internal Revenue Service and the United States Department of Labor.

(C) Notices of payment and reporting delinquency to Indian tribes or their tribal units shall include information that failure to make full payment within the prescribed time frame will cause:

1. The Indian tribe to be liable for taxes under the Federal Unemployment Tax Act;

2. The Indian tribe to be excepted from the definition of "employer," as provided in section (1) of this rule, and services in the employ of the Indian tribe, as provided in section (1) of this rule, to be excepted from "employment."

(6) Extended Benefits. Extended benefits paid that are attributable to service in the employ of an Indian tribe and not reimbursed by the federal government shall be financed in their entirety by such Indian tribe.

*AUTHORITY: section 288.220, RSMo 2000. Emergency rule filed June 13, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed rule covering this same material is published in this issue of the Missouri Register.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 40—Division of Family Services  
Chapter 2—Income Maintenance**

**EMERGENCY AMENDMENT**

**13 CSR 40-2.140 Limitations on Amount of Cash Payments.**  
The division is amending section (6).

*PURPOSE: This amendment expands the reasons for ineligibility for General Relief when a family meets the definition of a Temporary Assistance household to include families losing Temporary Assistance when they reach their lifetime limits and due to other prohibitions of receipt of Temporary Assistance.*

*EMERGENCY STATEMENT: Persons receiving benefits under the Temporary Assistance program are reaching their lifetime limits as established under 13 CSR 40-2.350. The Temporary Assistance program also has other prohibitions for receiving benefits which relate to participation in work activities and other technical requirements. It is not the intent of the General Relief program to provide benefits to persons who meet the definition of the Temporary Assistance household, but who do not qualify due to refusal to meet program requirements, due to reaching lifetime limits and the like. Funding for the General Relief program is set by the General Assembly and cannot be used to circumvent the Temporary Assistance requirements. Because Temporary Assistance lifetime limits are being reached by families beginning July 1, 2002, promulgation of this emergency amendment is necessary to preserve the government's compelling interest of conserving General Relief funds for the population it is intended to serve and preventing their use in a way that circumvents the Temporary Assistance program restrictions. A proposed amendment which covers this same material is published in this issue of the Missouri Register. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the Missouri and United States Constitutions. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 20, 2002, effective July 1, 2002 and expires December 27, 2002.*

(6) All persons who meet the definition of [an AFDC] a Temporary Assistance household must have their eligibility explored under [AFDC (except under emergency situations when GR orders may be utilized)] Temporary Assistance before having their eligibility for GR explored. Any person whose eligibility has been explored under [AFDC] Temporary Assistance and is found to be ineligible for [AFDC cash payments] Temporary Assistance because of the following reasons shall be ineligible for GR:

(A) The person refuses to cooperate in establishing his/her eligibility for [AFDC] Temporary Assistance (this would include persons who refuse to apply for a Social Security number, [refuse to register for Work Incentive (WIN) program] refuse to participate in work activities, refuse to make an assignment of support rights, refuse to cooperate in the identification or location of absent parents, refuse to participate in a self-sufficiency pact or an assessment pursuant to 13 CSR 40-2.370, and the like);

(D) The available resources exceed the maximum allowed; [or]

(E) The children are not deprived of parental support[.];

(F) The person meets the prohibition in 13 CSR 40-2.305, 13 CSR 40-2.340, 13 CSR 40-2.345, 13 CSR 40-2.355, 13 CSR 40-2.360, or 13 CSR 40-2.365; or

(G) The person is ineligible due to the lifetime limits outlined in 13 CSR 40-2.350.

*AUTHORITY: section 207.020, RSMo [1986] 2000. Filing dates for original rules are shown in the text of the rule. This version filed March 24, 1976. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the Missouri Register.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 40—Division of Family Services**  
**Chapter 2—Income Maintenance**

**EMERGENCY RULE**

**13 CSR 40-2.375 Medical Assistance for Families**

*PURPOSE:* This emergency rule establishes the income limit for the Medical Assistance for Families program after June 30, 2002.

*EMERGENCY STATEMENT:* Missouri's economic status requires emergency measures to contain cost wherever feasible. The State Fiscal Year (SFY) 2002 revenue projection is expected to be \$750 million less than the original consensus revenue forecast, which was established in December 2000. The Department of Social Services has been required to withhold funds appropriated in the SFY 2002 budget in response to the shortfall in projected revenue in August 2001, December 2001, and May 2002. These withholdings have totaled \$53.4 million in General Revenue funds and \$24.3 million in other funds. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In order to meet SFY 2003 projected revenues, the 91st General Assembly, in House Bill IIII, approved core reductions to the Medical Assistance for Families program, totaling \$22.8 million. Beginning July 1, 2002 Medicaid coverage for Medical Assistance for Families is modified so that the income limit is reduced from one hundred percent (100%) of the federal poverty level to seventy-seven percent (77%) of the federal poverty level. An Emergency Rule is necessary to preserve a compelling governmental interest. The Department of Social Services (DSS), Division of Family Services and Division of Medical Services must modify spending through certain programs to more closely align expenditures with available revenues for SFY 2003. Through HB IIII, the legislature has acted. DSS is required to implement the actions of the legislature. The actions of the legislature are made clear through language in the bill, dollars appropriated and any subsequent letters of intent issued to clarify the legislature's actions. In SFY 2003, DSS must cut spending in identified programs, to preserve the compelling governmental interest reflected in the actions of the legislature that are designed to achieve a balanced state budget. The majority of these spending cuts must be implemented effective July 1, 2002 to give the greatest opportunity to achieve the savings projected through these program cuts or reductions for SFY 2003. The necessary projected savings cannot be acquired through the regular rulemaking process and, thus, requires emergency rulemaking. Promulgation of this emergency rule is necessary to preserve the compelling governmental interest to achieve a balanced state budget for SFY 2003. A proposed rule, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The division believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed June 7, 2002, effective July 1, 2002 and expires December 27, 2002.

(1) The income limit for persons to be eligible for the Medical Assistance for Families program established pursuant to section 208.145, RSMo is at or below seventy-seven percent (77%) of the federal poverty level for the household size.

(2) The standard work expense for persons with earned income shall be ninety dollars (\$90).

*AUTHORITY:* sections 208.145 and 207.020, RSMo 2000. Emergency rule filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed rule covering this same material is published in this issue of the *Missouri Register*.

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 40—Division of Family Services**  
**Chapter 30—Permanency Planning for Children**

**EMERGENCY RULE**

**13 CSR 40-30.030 Attorney Fees and Guardian Ad Litem Fees in Subsidized Adoption and Guardianship Cases**

*PURPOSE:* This rule establishes fees for attorneys and guardians *ad litem* who provide services in subsidized adoption and subsidized guardianship cases.

*EMERGENCY STATEMENT:* The division has determined that an emergency rule is necessary to establish fees for attorneys and guardians *ad litem* who provide services in subsidized adoption and subsidized guardianship cases. In fulfilling its responsibility of ensuring that children in foster care achieve permanency, the division finds it necessary in certain cases to initiate adoption or guardianship proceedings in order to provide a permanent plan for these children. Ensuring that adequate representation of the prospective adoptive parents or guardians is provided in these cases is a vital part of this process. The division finds that an immediate danger to the health, safety and welfare to the citizens of Missouri exists inasmuch as there presently is no rule in effect to provide a fair and equitable procedure for the payment of fees to attorneys to provide essential representation in subsidized adoption and subsidized guardianship cases. Having an established procedure for payment of fees in subsidized adoption and subsidized guardianship cases will assist the courts, the agency and all interested parties, including attorneys, by assuring that a just compensation is awarded under the criteria established. The division finds that this emergency rule is necessary to preserve a compelling governmental interest in achieving permanency for children that requires an early effective date and certifies that the reasons supporting this finding are as follows: 1) it will help to promote fiscal responsibility by conserving monetary resources allocated for representation and assistance; 2) it will provide necessary guidance to the courts in determining how compensation will be provided; 3) it will enable all attorneys and guardians *ad litem* involved in such cases to know what compensation to expect; and 4) it will help ensure that the best interest of the children are protected by enabling attorneys and guardians *ad litem* to be provided fair compensation for their services in these cases. Without this emergency rule, there is a danger that compensation to attorneys and guardians *ad litem* will be unequal throughout the state and that the rights of all parties, including the best interest of the children, will not be adequately safeguarded through effective representation and assistance. A proposed rule, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency rule is limited to circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The division believes the emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed on June 13, 2002, effective June 24, 2002, and expires December 20, 2002.

(1) If permanency for the children requires that children be adopted or placed under a guardianship, the children's prospective adoptive parents/guardians shall be provided representation in such cases which shall include counsel, investigative, expert and other services to ensure adequate representation. Representation shall be

provided for any person(s) who have been identified as a prospective adoptive resource for a child who is eligible for the Missouri Adoption Subsidy program. A family is considered to be a prospective adoptive resource when it has been identified as a potential resource for a child via an adoption staffing held by the case manager of the child who is available for adoption. A child is considered eligible for the Missouri Adoption Subsidy program when he or she is or has been in the custody of the Division of Family Services or one (1) of the following agencies: Department of Mental Health, Division of Youth Services or a licensed child-placing agency.

(2) Payment for attorney representation shall be made as provided below.

(A) Hourly Rate. Any attorney shall, at the conclusion of the representation (i.e., the conclusion of trial or at the conclusion of any appeal, or both at the conclusion of the hearing and at the conclusion of appeal), be compensated at a rate not exceeding one hundred dollars (\$100) per hour for time expended in court and seventy-five dollars (\$75) per hour for time reasonably expended out of court, unless the court determines that a higher rate of not in excess of one hundred dollars (\$100) per hour is justified for the area where the services were performed or by reason of the nature of the services performed. Attorneys may be reimbursed for expenses reasonably incurred, including the costs of transcripts authorized by the court.

(B) Maximum Amounts. The compensation to be paid for representation at an adoption hearing shall not exceed one thousand five hundred dollars (\$1,500) for uncontested matters and three thousand dollars (\$3,000) for contested matters. For representation in an appellate court, the compensation shall not exceed two thousand five hundred dollars (\$2,500) at one hundred dollars (\$100) per hour. The compensation to be paid for representation for a guardianship action shall not exceed five hundred dollars (\$500) as budgeted by the state legislature.

(C) Waiving Maximum Amounts. Payment in excess of any maximum amount provided in subsection (2)(B) may be made for extended or complex representation whenever the court in which the representation was rendered certifies that the amount of the excess payment is necessary to provide fair compensation and the payment is approved by the court. At any time an attorney believes that the cost of representation will surpass the limit of three thousand dollars (\$3,000), they must provide written documentation to the Division of Family Services, as to why they do not think that the case will be completed under the current maximum fee.

(D) Disclosure of Fees. The amounts paid to particular attorneys or groups of attorneys shall be available as public records. However, the identity of parties, including parents, children, foster parents and anyone whose confidentiality is established in Chapter 210 or 211, RSMo, shall not be publicly available.

(E) Filing Claims. A separate claim for compensation and reimbursement shall be made to the adoptive parent for each case. Each claim shall be supported by a sworn written statement specifying the time expended, services rendered, and expenses incurred while the case was pending before the court, and the compensation and reimbursement applied for or received in the same case from any other source. The Division of Family Services may agree to the claim, may negotiate the claim with the applying attorney, or may deny the claim in which case the attorney shall apply to the court to determine the compensation and reimbursement to be paid to the attorney.

(F) New Hearings. For purposes of compensation and other payments authorized by this section, an order by a trial or appellate court granting a new trial shall be deemed to initiate a new case.

(3) Payment for Guardian *Ad Litem*. Children involved in adoption or guardianship cases are entitled to a guardian *ad litem*. The fees

for the guardian *ad item* shall be paid in the maximum amount of five hundred dollars (\$500) at seventy-five dollars (\$75) per hour.

*AUTHORITY: section 207.020, RSMo 2000. Emergency rule filed June 13, 2002, effective June 24, 2002, expires Dec. 20, 2002. A proposed rule covering this same material is published in this issue of the Missouri Register.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 4—Conditions of Recipient Participation,**  
**Rights and Responsibilities**

**EMERGENCY AMENDMENT**

**13 CSR 70-4.090 Uninsured Parents' Health Insurance Program.** The division is amending sections (2), (6), (7), and (8) and deleting sections (3) and (4).

*PURPOSE: This emergency amendment establishes who will be eligible for the Uninsured Parents' Health Insurance Program after June 30, 2002.*

*EMERGENCY STATEMENT: Missouri's economic status requires emergency measures to contain costs wherever feasible. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In order to meet the SFY 2003 projected revenue, the 91st General Assembly in House Bill IIII approved core reductions to services for uninsured parents totaling \$6.3 million. Beginning July 1, 2002, Medicaid coverage for low-income parents is to be modified as follows: noncustodial parents' coverage is eliminated; Parents' Fair Share participants' coverage is eliminated; extended transitional benefits coverage is reduced from two (2) additional years beyond transitional coverage to one (1) additional year for qualifying parents with income eligibility reduced from below three hundred percent (300%) to one hundred percent (100%) of the federal poverty level; and women's health services is reduced from two (2) years to one (1) year. An emergency amendment is necessary to preserve a compelling governmental interest. The Department of Social Services (DSS), Division of Medical Services must modify spending through certain programs to more closely align expenditures with available revenues for SFY 2003. Through HB IIII, the legislature has acted. DSS is required to implement the actions of the legislature, as they are reflected in the bill. The actions of the legislature are made clear through language in the bill, dollars appropriated and any subsequent letters of intent issued to clarify the legislature's actions. In SFY 2003, DSS must cut spending in identified programs, to preserve the compelling governmental interest reflected in the actions of the legislature that are designed to achieve a balanced state budget. The majority of these spending cuts must be implemented effective July 1, 2002 to give the greatest opportunity to achieve the savings projected through these program cuts or reductions for SFY 2003. The necessary projected savings cannot be acquired through the regular rulemaking process and, thus, requires emergency rulemaking. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest to achieve a balanced state budget for SFY 2003. A proposed amendment, which covers the same material, is published in this issue of the Missouri Register. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the Missouri and United States Constitutions. The division believes this emergency amendment is*

*fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 7, 2002, effective July 1, 2002 and expires December 27, 2002.*

(2) The following uninsured individuals shall be eligible to receive medical services to the extent and in the manner provided in this regulation:

(A) Individuals losing transitional medical assistance (TMA) who would not otherwise be insured or Medicaid eligible, with *[gross] net income at or below [three hundred percent (300%)] one hundred percent (100%)* of the federal poverty level for the household size—

1. Eligibility for the Uninsured Parents' Health Insurance Program for individuals losing TMA ends *[twenty-four (24)] twelve (12)* months after TMA eligibility ends; and

2. After coverage ends, the individuals with a child eligible for MC+ have the option of staying in the MC+ health plan, where managed care is available, if the parents pay the cost of the state's cost for the time period covered by the Missouri Medicaid Section 1115 Health Care Reform Demonstration Proposal as approved by the Health Care Financing Administration;

*[(B) Uninsured non-custodial parents with income at or below one hundred twenty-five percent (125%) of the federal poverty level for the household size who are current in paying their child support—*

1. Eligibility for the Uninsured Parents' Health Insurance Program for uninsured non-custodial parents with income below one hundred twenty-five percent (125%) of the federal poverty level ends after twenty-four (24) total months, the months can be non-consecutive; and

2. Child support refers to a legally obligated dollar amount established by court or administrative order;

(C) Uninsured non-custodial parents who are actively participating in Missouri's Parents' Fair Share Program;

(D) Uninsured custodial parents with family income at or below one hundred percent (100%) of the federal poverty level for the household size; and]

*[(E)] (B)* Uninsured women who do not qualify for other medical assistance benefits, and would lose their Medicaid eligibility sixty (60) days after the birth of their child or sixty (60) days after a miscarriage, will continue to be eligible for family planning and limited testing of sexually transmitted diseases (EWH), regardless of income, for *[twenty-four (24)] twelve (12)* consecutive months *[after the pregnancy ends]*.

(3) *[Uninsured parents identified in subsections (2)(B), (2)(C) or (2)(D) who had health insurance in the six (6) months prior to the month of application shall not be eligible for coverage under this rule until six (6) months after coverage was dropped.*

(4) *The six (6)-month period of ineligibility would not apply to parents who lose health insurance due to:*

(A) Loss of employment due to factors other than voluntary termination;

(B) Employment with a new employer that does not provide an option for coverage;

(C) Expiration of the Consolidated Budget Reconciliation Act (COBRA) coverage period;

(D) Lapse of health insurance when the lifetime maximum benefits under their private health insurance have been exhausted; or

(E) Lapse of health insurance when maintained by an individual other than the parent, individual losing TMA, or women who qualify for EWH.]

*[(5)] (3)* Beneficiaries covered in section (2) of this rule shall be eligible for service(s) from the date their application is received. No service(s) will be covered prior to the date the application is received.

*[(6)] (4)* The following services are covered for beneficiaries of the Uninsured Parents' Health Insurance Program if they are medically necessary:

(A) Inpatient hospital services;

(B) Outpatient hospital services;

(C) Emergency room services;

(D) Ambulatory surgical center, birthing center;

(E) Physician, advanced practice nurse, and certified nurse midwife services;

(F) Maternity benefits for inpatient hospital and certified nurse midwife. The health plan shall provide coverage for a minimum of forty-eight (48) hours of inpatient hospital services following a vaginal delivery and a minimum of ninety-six (96) hours of inpatient hospital services following a cesarean section for a mother and her newly born child in a hospital or any other health care facility licensed to provide obstetrical care under the provision of Chapter 197, RSMo. A shorter length of hospital stay for services related to maternity and newborn care may be authorized if a shorter inpatient hospital stay meets with the approval of the attending physician after consulting with the mother and is in keeping with federal and state law. The health plan is to provide coverage for post-discharge care to the mother and her newborn. The physician's approval to discharge shall be made in accordance with the most current version of the "Guidelines for Perinatal Care" prepared by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists, or similar guidelines prepared by another nationally recognized medical organization and be documented in the patient's medical record. The first post-discharge visit shall occur within twenty-four (24) to forty-eight (48) hours. Post-discharge care shall consist of a minimum of two (2) visits at least one (1) of which shall be in the home, in accordance with accepted maternal and neonatal physical assessments, by a registered professional nurse with experience in maternal and child health nursing or a physician. The location and schedule of the post-discharge visits shall be determined by the attending physician. Services provided by the registered professional nurse or physician shall include, but not be limited to, physician assessment of the newborn and mother, parent education, assistance and training in breast or bottle feeding, education and services for complete childhood immunizations, the performance of any necessary and appropriate clinical tests and submission of a metabolic specimen satisfactory to the state laboratory. Such services shall be in accordance with the medical criteria outlined in the most current version of the "Guidelines for Perinatal Care" prepared by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists, or similar guidelines prepared by another nationally recognized medical organization. If the health plan intends to use another nationally recognized medical organization's guidelines, the state agency must approve prior to implementation of its use;

(G) Family planning services;

(H) Pharmacy benefits;

(I) Dental services to treat trauma *[or disease]*;

(J) Laboratory, radiology and other diagnostic services;

(K) Prenatal case management;

(L) Hearing aids and related services;

(M) Eye exams and services to treat trauma or disease (one (1) pair of glasses after cataract surgery only);

(N) Home health services;

(O) Emergent (ground or air) transportation;

(P) Non-emergent transportation only for members in ME Code 78 Parents' Fair Share;

(Q) Mental health and substance abuse services;

(R) Services of other providers when referred by the health plan's primary care provider;

(S) Hospice services;

(T) Durable medical equipment (including but not limited to: orthotic and prosthetic devices, respiratory equipment and oxygen, enteral and parenteral nutrition, wheelchairs and walkers, diabetes supplies and equipment);

(U) Diabetes self-management training for persons with gestational, Type I or Type II diabetes;

(V) Services provided by local health agencies (may be provided by the health plan or through an arrangement between the local health agency and the health plan)—

1. Screening, diagnosis, and treatment of sexually transmitted diseases;

2. HIV screening and diagnostic services;

3. Screening, diagnosis, and treatment of tuberculosis; and

(W) Emergency medical services. Emergency medical services are defined as those health care items and services furnished or required to evaluate or stabilize a sudden and unforeseen situation or occurrence or a sudden onset of a medical or mental health condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that the failure to provide immediate medical attention could reasonably be expected by a prudent lay person, possessing average knowledge of health and medicine, to result in:

1. Placing the patient's health (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; or

2. Serious impairment of bodily functions; or

3. Serious dysfunction of any bodily organ or part; or

4. Serious harm to a member or others due to an alcohol or drug abuse emergency; or

5. Injury to self or bodily harm to others; or

6. With respect to a pregnant woman who is having contractions: a) that there is inadequate time to effect a safe transfer to another hospital before delivery; or b) that transfer may pose a threat to the health or safety of the woman or the unborn child.

*[[7]] (5) Individuals losing TMA[, uninsured non-custodial parent(s) with family income at or below one hundred twenty-five percent (125%) of the federal poverty level who are current in paying their child support and uninsured custodial parent(s) with family income at or below one hundred percent (100%) of the federal poverty level] shall owe a ten dollar (\$10) co-payment for certain professional services and a five dollar (\$5) co-payment in addition to the recipient portion of the professional dispensing fee for pharmacy services required by 13 CSR 70-4.051.*

(A) Providers may request payment of the mandatory co-payment(s) prior to or after service delivery.

(B) The co-payment amount shall be deducted from the Medicaid maximum allowable amount for fee-for-service claims reimbursed by the Division of Medical Services.

(C) Service(s) may not be denied for failure to pay the mandatory co-payment(s).

(D) When a mandatory co-payment is not paid, the Medicaid provider will have the following options:

1. Forego the co-payment entirely;

2. Make arrangements for future payment with the recipient; or

3. File a claim with the Division of Medical Services to report the non-payment of the mandatory co-payment(s) and secure payment for the service from the Division of Medical Services.

(E) When the Division of Medical Services receives a claim from a Medicaid fee-for-service provider for non-payment of the mandatory co-payment, the division shall send a notice to the recipient—

1. Requesting that the recipient reimburse the Division of Medical Services for the mandatory co-payment made on their behalf;

2. Requesting information from the recipient to determine if the mandatory co-payment was not made because there has been a change in the financial situation of the family; and

3. Advising the recipient of the possible loss of coverage for up to six (6) months if the recipient fails to pay three (3) co-payments in one (1) year.

(F) The recipient will be allowed fourteen (14) calendar days to respond. If the recipient indicated there has been a change in the financial situation of the family, the state shall redetermine eligibility—

1. If the eligibility redetermination places the recipient in a non-mandatory co-payment category, there will be no co-payment due; or

2. If the eligibility redetermination does not place the recipient in a non-mandatory co-payment category another notice will be sent to the recipient about the mandatory co-payment provision of the program which shall include the number of co-payments that have not been paid and how many may not be paid before a recipient is terminated from the program.

(G) Notice of non-payment of mandatory co-payment(s) sent to the recipient during the course of a year shall establish a pattern of not meeting the mandatory cost sharing requirement of the program. The process to terminate eligibility shall proceed with the third failure to pay a mandatory co-payment in any one (1) year or until one (1) or more of the three (3) delinquent mandatory co-payments is made. Coverage shall begin again only after payment of one (1) or more of the three (3) co-payments or passage of six (6) months time whichever occurs first. Health care coverage shall not be retroactive.

1. A year starts at the time a co-payment is reported not paid to the Division of Medical Services;

2. Payment of a delinquent co-payment or co-payments will eliminate the failure to pay a mandatory co-payment or co-payments.

(H) Recipient(s) shall have access to a fair hearing process to appeal the disenrollment decision.

(I) If the recipient fails to pay the mandatory co-payments three (3) times within a year and is disenrolled from coverage the recipient shall not be eligible for coverage for six (6) months after the department provides notice to the recipient of disenrollment for failure to pay mandatory co-payments or until one (1) or more of the three (3) delinquent mandatory co-payments is paid. Coverage shall begin again only after payment of one (1) or more of the three (3) co-payments or passage of six (6) months whichever occurs first. Coverage shall not be retroactive.

*[[8]] (6) [Uninsured non-custodial parents who are actively participating in Missouri's Parents' Fair Share Program and u/Uninsured women who do not qualify for other benefits, and would lose their Medicaid eligibility sixty (60) days after the birth of their child or sixty (60) days after a miscarriage are not required to pay a co-payment for services.*

*[[9]](7) The Department of Social Services, Division of Medical Services shall provide for granting an opportunity for a fair hearing to any applicant or recipient whose claim for benefits under the Missouri Medicaid Section 1115 Health Care Reform Demonstration Proposal is denied or disenrollment for failure to pay mandatory co-payments has been determined by the Division of Medical Services. There are established positions of state hearing officer within the Department of Social Services, Division of Legal Services in order to comply with all pertinent federal and state law and regulations. The state hearing officers shall have authority to conduct state level hearings of an appeal nature and*



shall serve as direct representative of the director of the Division of Medicaid Services.

*AUTHORITY: sections 208.040, RSMo Supp. 2001, 208.201 and 660.017, RSMo 2000. Emergency rule filed Sept. 13, 1999, effective Sept. 23, 1999, terminated Oct. 15, 1999. Original rule filed Aug. 16, 1999, effective March 30, 2000. Amended: Filed March 29, 2001, effective Oct. 30, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the Missouri Register.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 15—Hospital Program**

**EMERGENCY AMENDMENT**

**13 CSR 70-15.040 Inpatient Hospital and Outpatient Hospital Settlements.** The division is amending section (1) and subsections (2)(E), (4)(A), (4)(C)–(E) and adding subsection (4)(F).

*PURPOSE: This amendment amends section (1) and subsections (2)(E), (4)(A), (4)(C)–(E) and adds (4)(F). The proposed changes eliminate final or amended settlements for outpatient hospital services for cost reports ending after December 31, 1998 for hospitals reimbursed under the prospective outpatient methodology authorized in 13 CSR 70-15.160.*

*EMERGENCY STATEMENT: The Division of Medical Services finds an immediate danger to public health and welfare which requires emergency actions. If this emergency rule is not enacted, it will cause significant cash flow shortages and financial strain on all hospitals which service more than eight hundred fifty thousand (850,000) Medicaid recipients. This will, in turn, result in an adverse impact on the health and welfare of those in need of medical care and treatment. A proposed amendment, which covers the same material, is published in this issue of the Missouri Register. This emergency amendment limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The Medical Services Division believes this emergency amendment to be fair to all interested persons and parties under the circumstances. The emergency amendment was filed June 20, 2002, effective July 1, 2002, and expires February 27, 2003.*

(1) General. This regulation defines the specific procedures used to calculate inpatient and outpatient settlements for Missouri in-state hospitals participating in the Missouri Medicaid program. Although inpatient and outpatient settlements are calculated at the same time, an overpayment for outpatient services shall not be offset against an underpayment for inpatient services. **Outpatient settlements shall not be determined for cost report periods ending after December 31, 1998 except for recently closed hospitals and new hospitals as provided for in subsection (4)(E).**

(2) Definitions.

(E) Outpatient services/cost. Reimbursable outpatient services or costs are services or costs that are provided prior to the patient being admitted to the hospital. Only outpatient services or cost which are reimbursed on a percentage of charge as defined in **[13 CSR 70-15.010] 13 CSR 70-15.160** will be included in the final settlement, unless they are excluded elsewhere in this regulation.

(4) Outpatient Hospital Settlements, Provider Based Rural Health Clinic (PBRHC) settlements or Provider Based Federally Qualified Health Centers (PBFQHC) settlements will be calculated after the

division receives the Medicare/Medicaid cost report with a NPR from the hospital fiscal intermediary.

(A) The Division of Medical Services shall adjust the hospital's outpatient Medicaid payments, PBRHC or PBFQHC Medicaid payments to conform with the percent of cost paid on an interim basis under **[13 CSR 70-15.010(13)(A)] 13 CSR 70-15.160** for the appropriate time period (except for those hospitals that qualify under subsection (4)(B), whose payments will be based on the percent of cost in paragraph (4)(A)1., 2., or 3.) for—

1. Services prior to January 5, 1994, the lower of eighty percent (80%) of the outpatient share of the costs from subsection (4)(D), or eighty percent (80%) of the outpatient charges from paragraph (4)(C)1.;

2. Services after January 4, 1994 and prior to April 1, 1998, the lower of ninety percent (90%) of the outpatient share of the cost from subsection (4)(D), or ninety percent (90%) of the outpatient charge from paragraph (4)(C)1.;

3. Services after March 31, 1998, **included in cost reports ending prior to January 1, 1999**, the lower of one hundred percent (100%) of the outpatient share of the cost from subsection (4)(D), or one hundred percent (100%) of the outpatient charge from paragraph (4)(C)1.; and

4. PBRHC and PBFQHC shall be reimbursed one hundred percent (100%) of its share of the cost in paragraph (4)(E)2.

(C) The Medicaid charges used to determine the cost, and the payments used to determine the settlement will be—

1. For outpatient services the charges and payments extracted from the Medicaid outpatient claims history for reimbursable services paid on a percentage basis under **[13 CSR 70-15.010] 13 CSR 70-15.160**.

2. For PBRHC and PBFQHC the charges and payments will be for services billed under 13 CSR 70-94.020.

(D) The Medicaid hospital's outpatient, cost will be determined by multiplying the overall outpatient cost-to-charge ratio, determined in accordance with paragraph (4)(D)1., by the Medicaid charges from paragraphs (4)(C)1. To this product will be added the Medicaid outpatient share of GME. The GME will be determined using the methodology on worksheet E-3 part IV from the Medicare/Medicaid cost report (HCFA 2552-92) by substituting Medicaid data in place of Medicare data.

1. The overall outpatient cost-to-charge ratio will be determined by multiplying the reported total outpatient charges for each ancillary cost center, excluding PBRHC or PBFQHC, on the supplemental worksheet C column 10 (HCFA 2552-83) or substitute schedule by the appropriate cost-to-charge ratio from worksheet C (HCFA 2552-92) column 7 part I of the fiscal intermediary's audited Medicare/Medicaid cost report to determine the outpatient cost for each cost center reimbursed on a percentage of charge basis by Medicaid under **[13 CSR 70-15.010] 13 CSR 70-15.160**. Total the outpatient costs from each cost center and total the outpatient charges from each cost center. Divide the total outpatient costs by the total outpatient charges to arrive at the overall outpatient cost-to-charge ratio.

(E) The Medicaid outpatient final settlement **for cost reports ending prior to January 1, 1999, unless the hospital closed prior to July 1, 2002**, will determine either an overpayment or an underpayment for the hospital's outpatient services **[and PBRHC or PBFQHC]**.

1. The outpatient Medicaid cost determined in subsection (4)(D) is multiplied by the percent of cost allowed in paragraph (4)(A)1., 2., or 3., to determine the reimbursable cost for outpatient services. (If a cost report covers both periods the outpatient Medicaid charges will be split to determine the reimbursable cost for each time period.) From this cost subtract the outpatient payments made on a percentage of charge basis under **[13 CSR 70-15.010] 13 CSR 70-15.160** for the time period. (Medicaid payments include the actual payment by Medicaid, third party payments, coinsurance and deductibles.) The difference is either an



overpayment (negative amount) due from provider or underpayment (positive amount) due to provider; [and]

2. [For PBRHC or PBFQHC services multiply the PBRHC or PBFQHC Medicaid charges from paragraph (4)(C)2., by the cost center's cost-to-charge ratio to determine PBRHC or PBFQHC cost. From this cost, the PBRHC or PBFQHC payments associated with charges from paragraph (4)(C)2., are subtracted. The difference is either an overpayment (negative amount) due from provider or underpayment (positive amount) due to provider.] Closed facilities. Hospitals which closed after January 1, 1999 but before July 1, 2002 will have final settlements for cost reports ending during this time period calculated in accordance with 13 CSR 70-15.040(4)(E)1.; and

3. New hospitals which do not have a fourth, fifth, and sixth prior year cost report necessary for establishment of a prospective rate will have final settlement calculated for their initial three (3) cost report periods.

(F) The Medicaid PBRHC or PBFQHC final settlement will determine either an overpayment or an underpayment for the hospital's PBRHC or PBFQHC services. For PBRHC or PBFQHC services multiply the PBRHC or PBFQHC Medicaid charges from paragraph (4)(C)2., by the cost center's cost-to-charge ratio to determine PBRHC or PBFQHC cost. From this cost, the PBRHC or PBFQHC payments associated with charges from paragraph (4)(C)2., are subtracted. The difference is either an overpayment (negative amount) due from provider or an underpayment (positive amount) due to provider.

*AUTHORITY: sections 208.152, 208.153, 208.201, RSMo 2000 and 208.471, RSMo Supp. 2001. Original rule filed June 2, 1994, effective Dec. 30, 1994. For intervening history, please consult the Code of State Regulations. Amended: Filed June 14, 2002. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 15—Hospital Program**

**EMERGENCY RULE**

**13 CSR 70-15.160 Prospective Outpatient Hospital Services Reimbursement Methodology**

*PURPOSE: This rule establishes a prospective outpatient reimbursement methodology for hospitals in place of the current retrospective reimbursement methodology. This rule establishes the methodology for setting a hospital's prospective outpatient payment percentage for hospital services effective July 1, 2002.*

*PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. Therefore, the material which is so incorporated is on file with the agency who filed this rule, and with the Office of the Secretary of State. Any interested person may view this material at either agency's headquarters or the same will be made available at the Office of the Secretary of State at a cost not to exceed actual cost of copy reproduction. The entire text of the rule is printed here. This note refers only to the incorporated by reference material.*

*EMERGENCY STATEMENT: The Division of Medical Services finds an immediate danger to public health and welfare which requires emergency actions. If this emergency rule is not enacted,*

*it will cause significant cash flow shortages and financial strain on all hospitals which service more than eight hundred fifty thousand (850,000) Medicaid recipients. This will, in turn, result in an adverse impact on the health and welfare of those in need of medical care and treatment. A proposed rule, which covers the same material, is published in this issue of the Missouri Register. This emergency rule limits its scope to the circumstances creating the emergency and complies with the protections extended by the Missouri and United States Constitutions. The Medical Services Division believes this emergency rule to be fair to all interested persons and parties under the circumstances. The emergency rule was filed June 20, 2002, effective July 1, 2002, and expires February 27, 2003.*

(1) Prospective Outpatient Hospital Services Reimbursement Percentage for Hospitals Located Within Missouri.

(A) Outpatient hospital services shall be reimbursed on a prospective outpatient payment percentage effective July 1, 2002 except for services identified in subsection (1)(C). The prospective outpatient payment percentage will be calculated using the Medicaid over-all outpatient cost-to-charge ratio from the fourth, fifth, and sixth prior base year cost reports regressed to the current State Fiscal Year (SFY). (If the current SFY is 2003 the fourth, fifth and sixth prior year cost reports would be the cost report filed in calendar year 1997, 1998 and 1999.) The prospective outpatient payment percentage shall not exceed one hundred percent (100%) except for nominal charge providers and shall not be less than twenty percent (20%).

(B) Outpatient cost-to-charge ratios will be as determined in the desk review of the base year cost reports.

(C) Outpatient hospital services reimbursement limited by rule.

1. All services provided to General Relief (GR) recipients will be reimbursed from the Medicaid fee schedule in accordance with provisions of 13 CSR 70-2.020.

2. Effective for dates of service September 1, 1985, and annually updated, certain clinical diagnostic laboratory procedures will be reimbursed from a Medicaid fee schedule which shall not exceed a national fee limitation.

3. Services of hospital-based physicians and certified registered nurse anesthetists shall be billed on an HCFA-1500 professional claim form, which is incorporated by reference as part of this rule, and reimbursed from a Medicaid fee schedule or the billed charge, if less.

4. Outpatient hospital services provided for those recipients having available Medicare benefits shall be reimbursed by Medicaid to the extent of the deductible and coinsurance as imposed under Title XVIII.

(2) Exempt Hospitals. Medicaid providers which do not have a fourth, fifth and sixth prior year cost report.

(A) Interim Payment Percentage. An interim outpatient payment percentage for new Medicaid hospital providers will be set at seventy-five percent (75%) for the first three (3) state fiscal years in which the hospital operates. The cost reports for these three (3) years will have a cost settlement calculated in accordance with 13 CSR 70-15.040.

(B) Outpatient Percentage. The outpatient payment percentage for the fourth and fifth year in which the hospital operates will be based on the overall Medicaid cost-to-charge ratio from its fourth prior year cost report.

(3) Closed Facilities. Hospitals which closed after January 1, 1999 but before July 1, 2002 will have final settlements for cost reports ending during this time period calculated in accordance with 13 CSR 70-15.040.

(4) Definitions.

(A) Base cost report. Desk-reviewed Medicare/Medicaid cost report. When a facility has more than one (1) cost report with periods ending in the fourth prior calendar year, the cost report covering a full twelve (12)-month period will be used. If none of the cost reports covers a full twelve (12) months, the cost report with the latest period will be used. If a hospital's base cost report is less than or greater than a twelve (12)-month period, the data shall be adjusted, based on the number of months reflected in the base cost report to a twelve (12)-month period.

(B) Cost report. A cost report details, for purposes of both Medicare and Medicaid reimbursement, the cost of rendering covered services for the fiscal reporting period. The Medicare/Medicaid Uniform Cost Report contains the forms utilized in filing the cost report.

(C) Effective date.

1. The plan effective date shall be July 1, 2002.

2. New prospective outpatient payment percentages will be effective July 1 of each SFY.

(5) Out-of-State Outpatient Reimbursement.

(A) Out-of-state outpatient hospital services and services of federally-operated hospitals located within Missouri will be reimbursed by Missouri Medicaid at sixty percent (60%) of usual and customary charges as billed by the provider for covered services with the exception for services in subsection (1)(C).

*AUTHORITY: sections 208.152, 208.153, 208.201, RSMo 2000 and 208.471, RSMo Supp. 2001. Original rule filed June 14, 2002. Emergency rule filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003.*

## Title 13—DEPARTMENT OF SOCIAL SERVICES

### Division 70—Division of Medical Services

#### Chapter 15—Hospital Program

#### EMERGENCY RULE

#### 13 CSR 70-15.170 Enhanced Disproportionate Share Payment to Trauma Hospitals for the Cost of Care to the Uninsured Provided by Physicians Not Employed by the Hospital

*PURPOSE: This rule establishes an enhanced disproportionate share payment, beginning in State Fiscal Year (SFY) 2003, to not-for-profit hospital, designated as a trauma hospital(s), in a county with more than one million residents, and within five miles of an international airport for the cost of the care to the uninsured provided at the trauma hospital by physicians not employed by the hospital.*

*EMERGENCY STATEMENT: Individual and mass casualty events present special challenges to health care systems and professionals. Promulgation of this emergency rule is necessary to preserve the compelling governmental interest of allocating funding necessary to maintain the current level of hospital trauma coverage and prepare adequately for any potential mass casualty event by establishing an enhanced disproportionate share payment for not-for-profit hospitals, designated as a trauma hospital, in a county with more than one (1) million residents, and within five (5) miles of an international airport. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the Missouri and United States Constitutions. The division believes this emergency rule is fair to all interested persons and parties under the circumstances. The emergency rule was filed June 20, 2002, effective July 1, 2002, expires February 27, 2003.*

(1) General Reimbursement Principles. Beginning in State Fiscal Year (SFY) 2003, not-for-profit hospital(s) which reimburse(s) physicians not employed by the hospital to provide emergency department services for the uninsured that has a trauma center designation, in a county with more than one (1) million residents, and within five (5) miles of an international airport shall receive an additional disproportionate share payment for the net cost of those physician services.

(2) Definitions.

(A) Trauma hospital. A trauma center designated by the Missouri Department of Health and Senior Services.

(B) Uninsured patients. Uninsured patients are patients not covered under any other government entitlement program, who have no health insurance, and do not have sufficient financial resources to pay for emergency department services.

(C) Disproportionate share payment. A disproportionate share payment is a payment to hospitals that serve a disproportionate number of low-income patients as defined in federal law.

(3) Payment Computation. The enhanced disproportionate share payment for each state fiscal year shall be computed using the net cost of services for the hospital's most recent fiscal year ending in the calendar year prior to July 1. The enhanced disproportionate share payment shall be computed as of July 1 and paid to the hospital in quarterly installments.

(A) Payment shall not be made unless the qualifying hospital files an application for the enhanced disproportionate share payment ninety (90) days prior to the July 1 start of the state fiscal year. However, application for SFY 2003 must be made by August 31, 2002. The completed application must include a summary of physician charges for emergency department services provided to uninsured patients, any payments received by the physician, and the net payment by the hospital.

(B) The enhanced disproportionate share payment shall be computed as a percentage of the hospital's net payment to the physician. The net payment to the physician shall be calculated as the cost of physician services in the emergency department to uninsured patients, less any payments made by the uninsured patient, less any amount paid by any other third party. The enhanced disproportionate share payment percentage may be up to one hundred percent (100%), subject to availability of funds for SFY 2003. Any payments received directly by the physician must not be included in the charge to the hospital for providing the service.

*AUTHORITY: sections 208.152, 208.153 and 208.201, RSMo 2000. Emergency rule filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003.*

## Title 13—DEPARTMENT OF SOCIAL SERVICES

### Division 70—Division of Medical Services

#### Chapter 20—Pharmacy Program

#### EMERGENCY AMENDMENT

#### 13 CSR 70-20.031 List of Excludable Drugs for Which Prior Authorization is Required. The division is amending section (3).

*PURPOSE: This amendment establishes a more timely notification to providers regarding products requiring prior authorization in order for them to be reimbursable under the Missouri Medicaid Pharmacy Program.*

*EMERGENCY STATEMENT: Expansion of prior authorization of drugs in medical assistance programs across the country has been recognized as a prudent cost containment measure. Missouri's economic status calls for emergency measures to contain cost*

wherever feasible. The State Fiscal Year (SFY) 2002 revenue projection is expected to be \$750 million less than the original consensus revenue forecast, which was established in December 2000. The Department of Social Services has been required to withhold funds appropriated in the SFY 2002 budget in response to the shortfall in projected revenues in August 2001, December 2001, and May 2002. These withholdings have totaled \$53.4 million in General Revenue funds and \$24.3 million in other state funds. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two years ago while it must fund mandatory items such as Medicaid caseload growth. In the SFY 2003 budget, the Department of Social Services' appropriation indicates cost containment in pharmacy costs in the Medical Assistance Program of over \$100 million (state and federal funds), including \$35.5 million in savings through the prior authorization of new drugs. Achieving cost containment necessary through prior authorization requires an effective date for this amendment in advance of that which can be obtained through the regular rulemaking process. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest of maximizing pharmacy cost containment to reduce expenditures to match projected actual revenues in SFY 2002 and to achieve a balanced state budget for SFY 2003. A proposed amendment, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 7, 2002, effective July 1, 2002, and expires December 27, 2002.

(3) List of drugs or categories of excludable drugs which are restricted to require prior authorization for certain specified indications [—] shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.

<i>[Drug or Category of Drug]</i>	<i>Allowed Indications</i>
Amphetamines	Attention Deficit Hyperactivity Disorder Narcolepsy
Barbiturates (with the exception of phenobarbital and mephobarbital and methabarbital which do not require prior authorization)	All medically accepted uses
Isotretinoin	Noncosmetic uses
Orlistat	Dyslipidemia
Retinoic Acid, topical	Noncosmetic uses]

**AUTHORITY:** sections 208.153 and 208.201, RSMo [1994] 2000. Original rule filed Dec. 13, 1991, effective Aug. 6, 1992. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 20—Pharmacy Program**

**EMERGENCY AMENDMENT**

**13 CSR 70-20.032 List of Drugs Excluded From Coverage Under the Missouri Medicaid Pharmacy Program.** The division is amending section (2).

**PURPOSE:** This amendment establishes a more timely notification to providers regarding products for which reimbursement is not available through the Missouri Medicaid Pharmacy Program.

**EMERGENCY STATEMENT:** The State Fiscal Year (SFY) 2002 revenue projection is expected to be \$750 million less than the original consensus revenue forecast, which was established in December 2000. The Department of Social Services has been required to withhold funds appropriated in the SFY 2002 budget in response to the shortfall in projected revenues in August 2001, December 2001, and May 2002. These withholdings have totaled \$53.4 million in General Revenue funds and \$24.3 million in other state funds. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two years ago while it must fund mandatory items such as Medicaid caseload growth. In the SFY 2003 budget, the Department of Social Services' appropriation indicates cost containment in pharmacy costs in the Medical Assistance Program of over \$100 million (state and federal funds), including \$6.5 million in savings through the exclusion of reimbursement of most over the counter drugs. Achieving cost containment necessary through the exclusion of reimbursement of most over-the-counter drugs requires an effective date for this amendment in advance of that which can be obtained through the regular rulemaking process. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest of maximizing pharmacy cost containment to reduce expenditures to match projected actual revenues in SFY 2002 and to achieve a balanced state budget for SFY 2003. A proposed amendment, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri* and *United States Constitutions*. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 7, 2002, effective July 1, 2002, and expires December 27, 2002.

(2) List of drugs or classes which are excluded from reimbursement through the Missouri Medicaid Pharmacy Program [—] shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.

<i>[Drug or Category]</i>	<i>Exceptions—Reimbursable</i>
Drugs used to promote fertility	
Drugs used to promote weight loss	
Drugs used to promote hair growth	
Drugs used for cosmetic purposes	
Nonlegend vitamins, multivitamins and minerals, adult	Children's Chewable Multivitamins Calcium Preparations Iron Preparations

*Drugs used to promote smoking cessation*

*Nonlegend lotions, shampoos and medicated soaps*

*Nonlegend acne preparations*

*Nonlegend weight control products*

*Nonlegend ophthalmic products*     *Artificial tear products*  
*Eyewash products*  
*Ocular lubricants*

*Contact lens products*

*Nonlegend oral analgesics*     *All nonlegend strengths and dosage forms of:*  
*Acetaminophen*  
*Aspirin*  
*Buffered Aspirin*  
*Ibuprofen*  
*Naproxen sodium*

*Nonlegend stimulant products*

*Nonlegend external analgesic products*

*Nonlegend hemorrhoidal products*

*Halazepam*

*Prazepam*

*Estazolam*

*Quazepam*

**AUTHORITY:** sections 208.153 and 208.201, RSMo [1994] 2000. Original rule filed Dec. 13, 1991, effective Aug. 6, 1992. Amended: Filed June 30, 2000, effective Feb. 28, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 20—Pharmacy Program**

**EMERGENCY AMENDMENT**

**13 CSR 70-20.034 List of Non-Excludable Drugs for Which Prior Authorization Is Required.** The division is amending section (2).

**PURPOSE:** This amendment establishes a more timely notification to providers regarding products requiring prior authorization in order for them to be reimbursable under the Missouri Medicaid Pharmacy Program.

**EMERGENCY STATEMENT:** Expansion of prior authorization of drugs in medical assistance programs across the country has been recognized as a prudent cost containment measure. Missouri's economic status calls for emergency measures to contain cost wherever feasible. The State Fiscal Year (SFY) 2002 revenue projection is expected to be \$750 million less than the original consensus revenue forecast, which was established in December 2000. The Department of Social Services has been required to withhold funds appropriated in the SFY 2002 budget in response to the shortfall in projected revenues in August 2001, December 2001, and May 2002. These withholdings have totaled \$53.4 million in General Revenue funds and \$24.3 million in other state funds. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In the SFY 2003 budget, the Department of

Social Services' appropriation indicates cost containment in pharmacy costs in the Medical Assistance Program of over \$100 million (state and federal funds), including \$35.5 million in savings through the prior authorization of new drugs. Achieving cost containment necessary through prior authorization requires an effective date for this amendment in advance of that which can be obtained through the regular rulemaking process. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest of maximizing pharmacy cost containment to reduce expenditures to match projected actual revenues in SFY 2002 and to achieve a balanced state budget for SFY 2003. A proposed amendment, which covers the same material, is published in this issue of the *Missouri Register*. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri and United States Constitutions*. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 7, 2002, effective July 1, 2002, and expires December 27, 2002.

(2) List of drugs or categories of drugs which are restricted to require prior authorization for certain specified indications/—/ shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.

<i>/Drug or Category of Drug</i>	<i>Allowed Indications</i>
<i>Abortifacients</i>	<i>Termination of pregnancy resulting from an act of rape or incest or when necessary to protect the life of the mother</i>
<i>Butorphanol, nasal spray</i>	<i>Override of quantity restriction allowed for medically accepted uses</i>
<i>Drugs used to treat sexual dysfunction</i>	<i>Sexual dysfunction</i>
<i>Histamine 2 Receptor Antagonists</i>	<i>Medically accepted uses</i>
<i>Ketorolac, oral</i>	<i>Short term treatment of moderately severe acute pain following injection of same entity</i>
<i>Linezolid, oral</i>	<i>Medically accepted uses</i>
<i>Modafanil</i>	<i>Narcolepsy</i>
<i>Proton Pump Inhibitors</i>	<i>Medically accepted uses</i>

**AUTHORITY:** sections 208.152, 208.153 and 208.201, RSMo [1994] 2000. Emergency rule filed Nov. 21, 2000, effective Dec. 1, 2000, expired May 29, 2001. Original rule filed June 29, 2000, effective Feb. 28, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the *Missouri Register*.

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 20—Pharmacy Program**

**EMERGENCY RULE**

**13 CSR 70-20.320 Pharmacy Reimbursement Allowance**

*PURPOSE: The purpose of this rule is to establish Pharmacy Federal Reimbursement Allowance and to determine the formula for the amount of allowance each pharmacy is required to pay for the privilege of providing outpatient prescription drugs.*

*EMERGENCY STATEMENT: Missouri's economic status calls for emergency measures to contain cost wherever feasible. The State Fiscal Year (SFY) 2002 revenue projection is expected to be \$750 million less than the original consensus revenue forecast, which was established in December 2000. The Department of Social Services has been required to withhold funds appropriated in the SFY 2002 budget in response to the shortfall in projected revenues in August 2001, December 2001, and May 2002. These withholdings have totaled \$53.4 million in General Revenue funds and \$24.3 million in other state funds. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In the SFY 2003 budget, the Department of Social Services' appropriation includes net gain of \$31.5 million as a result of the pharmacy tax. If this program does not become operational July 1, 2002, the State would have to come up with the difference in General Revenue funds. Promulgation of this emergency rule is necessary to preserve the compelling governmental interest of implementing those actions taken by the executive and being implemented by the Department of Social Services to maximize revenue to achieve a balanced state budget for SFY 2003. A proposed rule, which covers the same material, is published in this issue of the **Missouri Register**. The scope of this emergency rule is limited to the circumstances creating the emergency and complies with the protections extended in the **Missouri and United States Constitutions**. The division believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency rule was filed June 20, 2002, effective July 1, 2002 and expires February 27, 2003.*

(1) Pharmacy Reimbursement Allowance (PRA). PRA shall be assessed as described in this section.

(A) Definitions.

1. Department—Department of Social Services.
2. Director—director of Department of Social Services.
3. Division—Division of Medical Services.
4. Monthly Gross Retail Prescription Receipts—For ease of administration for the department as well as the industry, this shall be an annual amount. The basis of tax for fiscal year 2003 will be the prescription sales for calendar year 2001.

(B) Each pharmacy engaging in the business of providing outpatient prescription drugs in Missouri to the general public shall pay a Pharmacy Reimbursement Allowance (PRA).

1. The PRA owed for existing pharmacies shall be calculated by multiplying the pharmacy's total gross retail prescription receipts by the tax rate determined by the department.
2. The PRA shall be divided by and collected over the number of months for which the PRA is effective.
3. The initial PRA owed by a newly licensed pharmacy shall be calculated by estimating the total prescription sales and multiplying the estimate by the tax rate determined by the department.

4. If a pharmacy ceases to provide outpatient prescription drugs to the general public, the pharmacy is not required to pay the PRA during the time it did not provide outpatient prescription drugs.

5. If the pharmacy reopens, it shall resume paying the PRA. It shall owe the same PRA as it did prior to closing, if the PRA has not changed per section (1)(B)1.

(C) Each pharmacy shall submit an affidavit to the department with the following information:

1. Pharmacy Name
2. Contact
3. Telephone Number
4. Address
5. Federal Tax ID Number
6. Medicaid Pharmacy Number (If applicable)
7. Pharmacy Sales (Total)
8. Medicaid Pharmacy Sales
9. Number of Paid Medicaid Prescriptions

(D) The department shall prepare a confirmation schedule of the information provided by each pharmacy and the amount of PRA that is due from the pharmacy.

(E) Each pharmacy shall review the information prepared by the department and the amount of Pharmacy Reimbursement Allowance calculated by the department to verify that the information is correct.

1. If the information supplied by the department is incorrect, the facility, within thirty (30) calendar days of receiving the confirmation schedule must notify the division and explain the correction.

2. If the division does not receive corrected information within thirty (30) calendar days, it will be assumed to be correct, unless the pharmacy files a protest in accordance with subsection (2)(D) of this regulation.

(2) Payment of the PRA.

(A) Offset.

1. Each pharmacy may request that their Pharmacy Reimbursement Allowance be offset against any Missouri Medicaid payment due to that pharmacy.

A. A statement authorizing the offset must be on file with the division before any offset may be made relative to the pharmacy reimbursement allowance by the pharmacy.

B. Assessments shall be allocated and deducted over the applicable service period.

C. Any balance due after the offset shall be remitted to the Director of the Department of Revenue and be deposited in the state treasury to the credit of the Pharmacy Reimbursement Allowance Fund.

D. If the remittance is not received before the next Medicaid payment cycle, the division shall offset the balance due from that check.

(B) Check.

1. If no offset has been authorized by the pharmacy, the division will begin collecting the pharmacy reimbursement allowance on the first day of each month for the preceding months.

2. The PFR shall be remitted by the pharmacy to the department. The remittance shall be made payable to the Director of the Department of Revenue and be deposited in the state treasury to the credit of the Pharmacy Reimbursement Allowance Fund.

(C) Failure to pay the PFR.

1. If a pharmacy fails to pay its PFR within thirty (30) days of notice, the PFR shall be delinquent.

2. For any delinquent PFR, the department may—

A. Proceed to enforce the state's lien of the property of the pharmacy;

B. May cancel or refuse to issue, extend or reinstate the Medicaid provider agreement; or

C. May seek denial, suspension or revocation of license granted under Chapter 198, RSMo.

3. The new owner, as a result of a change in ownership, shall have his/her PFR paid by the same method the previous owner elected.

(D) Each pharmacy, upon receiving written notice of the final determination of its Pharmacy Reimbursement Allowance may file a protest with the director of the department setting forth the grounds on which the protest is based, within thirty (30) days from the date of receipt of written notice from the department. The director of the department shall reconsider the determination and, if the pharmacy so requested, grant the pharmacy a hearing to be held within forty-five (45) days after the protest was filed, unless extended by agreement between the pharmacy and the director. The director shall issue a final decision within forty-five (45) days of the completion of the hearing. After a final decision by the director, a pharmacy's appeal of the director's final decision shall be to the Administrative Hearing Commission in accordance with sections 208.156, RSMo 2000 and 621.055, RSMo Supp. 2001.

(E) PFR Rates.

1. The PFR tax rates will be done in bands and will be determined by the ratio of paid Medicaid claims to total prescription sales.

2. The maximum rate shall be six percent (6%).

3. Adjustments will be made to the tax rate if the average Medicaid prescription charge for an individual entity is statistically different than that of the other entities in the assigned tax band.

*AUTHORITY: section 208.201, RSMo 2000. Emergency rule filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003.*

### **Title 13—DEPARTMENT OF SOCIAL SERVICES Division 70—Division of Medical Services Chapter 35—Dental Program**

#### **EMERGENCY AMENDMENT**

**13 CSR 70-35.010 Dental Benefits and Limitations, Medicaid Program.** The division is amending sections (1), (4), (7), (8), and (9).

*PURPOSE: This emergency amendment changes the adult dental benefits and limitations of the Missouri Medicaid program to reflect the provisions of the State Fiscal Year 2003 budget as passed by the 91st General Assembly and signed by the governor.*

*EMERGENCY STATEMENT: Missouri's economic status requires emergency measures to contain costs wherever feasible. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In order to meet the SFY 2003 projected revenue, the 91st General Assembly in House Bill IIII approved core reductions to adult dental services. Beginning July 1, 2002, Medicaid coverage for adults (not children) is eliminated with the exception of dentures and treatment of trauma to the mouth or teeth as a result of injury. An emergency amendment is necessary to preserve the compelling governmental interest effectuating the changes reflected through the appropriations process. The Department of Social Services (DSS), Division of Medical Services must modify spending as provided for in HB IIII to more closely align expenditures with available revenues for SFY 2003. DSS is required to implement the actions of the legislature and the governor. These actions are made clear through the bill, dollars appropriated and any subsequent letters of intent issued to clarify the legislature's actions.*

*In SFY 2003, DSS must cut spending in identified programs, to preserve the compelling governmental interest reflected in the actions of the legislature that are designed to achieve a balanced state budget. The majority of these spending cuts must be implemented effective July 1, 2002 to give the greatest opportunity to achieve the savings projected through these program cuts or reductions for SFY 2003. The necessary projected savings cannot be acquired through the regular rulemaking process and, thus, requires emergency rulemaking. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest to modify spending to conform to monies appropriated. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the Missouri and United States Constitutions. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 27, 2002, effective July 7, 2002 and expires February 27, 2003.*

(1) Administration. The Missouri Medicaid dental program shall be administered by the Division of Medical Services, Department of Social Services. The dental services covered and not covered, the limitations under which services are covered and the maximum allowable fees for all covered services shall be determined by the Division of Medical Services and shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual. Dental services covered by the Missouri Medicaid program shall include only those which are clearly shown to be medically necessary. The division reserves the right to effect changes in services, limitations and fees with proper notification to Medicaid dental providers.

(4) Prior Authorization. Prior authorization shall be required in the following [two (2)] case(s): a)/: initial placement or replacement of all full dentures (upper, lower or both) [and b) placement or replacement of all partial dentures]. When prior authorization is required, the form provided by the Division of Medical Services or its contracted agent shall be used. The dental service shall not be started until written approval has been received. Telephone approval shall not be given. Prior authorization shall be effective for a period of one hundred twenty (120) days from the date of written approval. Prior authorization approves the medical necessity of the requested dental service. It shall not guarantee payment for that service as the patient must be a Medicaid-eligible recipient on the date the service is performed. The division reserves the right to request documentation regarding any specific request for prior authorization.

(7) Dental Certification. A dental certification form as provided by the Division of Medical Services or its contracted agent shall be completed in the case of any denture[, partial or full, except for those flipper-type partials identified in the Dental Services Provider Manual]. This completed form shall be attached to the claim and the request for prior authorization.

(8) Dental Manual. A Medicaid Dental Manual shall be produced by the Division of Medical Services and [shall be distributed to all dental providers participating in the Missouri Medicaid program. It shall contain a list of covered and noncovered services, the limitations under which services are covered and other pertinent data to supplement this rule. The Health Care Financing Administration's Common Procedure Coding System (HCPCS) Level 1, 2 or 3 procedure codes, which includes a modification of the American Dental Association's (ADA) Code on Dental Procedures and Nomenclature shall be used in the manual.] made available through the Department of Social Services, Division of

**Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual. Maximum allowable fees by the Missouri Medicaid Dental Program shall be [published in] made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider manuals and bulletins.**

(9) **Services, Covered and Noncovered.** The list shown in this section represents the groupings of medically necessary services covered by the Missouri Medicaid program. **Only dentures and treatment of trauma to the mouth or teeth as a result of injury are covered dental services for Medicaid-eligible adults.** The *Medicaid Dental Manual* shall provide the detailed listing of procedure codes and pricing information.

*[(A) Anesthesia. General anesthesia administered in the office is a covered service. General anesthesia administered in the hospital for dental care is payable to the hospital. Local anesthesia is not paid under a separate procedure code and is included in the treatment fee. Nitrous oxide is not covered;]*

*[(B) Crowns, Bridges, Inlays. A crown of chrome or stainless steel is a covered item. A crown of polycarbonate material is a covered item for an anterior tooth. Crowns of other materials are not covered. Cast restorations indicated by an early periodic screening diagnosis and treatment (EPSDT) screen are covered;]*

*[(C)] (A) Full Dentures. One (1) upper full denture, one (1) lower full denture, or one (1) complete set (upper and lower) of full dentures is covered. A full denture must be constructed of acrylic material and must meet the following criteria: full arch impression, bite registration, each tooth set individually in wax, try-in of teeth set individually in wax before denture processing, insertion of the processed denture and six (6)-month follow-up adjustments, to be a covered item. Service in the case of any full denture is not completed and shall not be claimed until the denture is placed. Noncovered items include temporary full dentures, full overdentures and immediate placement full dentures;]*

*[(D) Partial Dentures. A partial denture shall replace permanent teeth and must be constructed of acrylic material to be a covered item. Service in the case of any partial denture is not completed and shall not be claimed until the denture is placed. Noncovered items include temporary partial dentures and partial overdentures. Immediate placement partial dentures are noncovered except for those flipper-type partials identified in the Dental Services Provider Manual under procedure codes D5820, D5820W5, D5820W6, D5820W9, D5821, D5821W5, D5821W6, D5821W9;]*

*[(E) Denture Adjustment and Repair. Denture adjustment is a covered service but not to the originating dentist of a new denture until six (6) months after the denture is placed. Repair of a broken denture may be accomplished on the same date of service as denture duplication or relining;]*

*[(F) Denture Duplication and Reline. Duplication of a partial or full denture is a covered service. Reline of a partial or full denture, either chair-side or laboratory, is covered. Duplications and relines are not covered within twelve (12) months of initial placement of an original denture. Additional denture relines or duplications are limited to once within three (3) years from the date of the last preceding reline or duplication. Denture duplication or relining may be accomplished on the same date of service as repair of a broken denture;]*

*[(G)] (B) Emergency Treatment. Emergency dental care does not require prior authorization and is covered whether performed by a licensed dentist or a licensed dentist specialist. Emergency*

*care is provided after the sudden onset of a medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that the absence of immediate medical attention reasonably could be expected to result in—placing the patient's health in serious jeopardy or serious impairment of bodily functions or serious dysfunction of any bodily organ or part. Emergency care not listed in the Medicaid Dental Manual shall be explained on the claim. An emergency oral examination is not paid under a separate procedure code and is included in the treatment fee. Palliative treatment on the same date of service as other dental care on the same tooth is not covered. Denture dental services are not [subject to] considered emergency treatment [consideration];]*

*[(H) Examinations, Visits, Consultations. An initial oral examination in the office is covered. Subsequent office medical services are covered. A professional visit to a nursing home is covered and shall include the fee for an oral examination. A professional visit to a hospital is covered and shall include the fee for an oral examination. A consultation by a dentist is a covered service and shall include the fee for an oral examination;]*

*[(I) Extractions. Extraction fees for permanent and deciduous teeth, as listed in the Medicaid Dental Manual, apply whether the service is performed in the office, hospital or ambulatory surgical center. Preoperative X rays involving extractions may be covered but postoperative X rays are not covered;]*

*[(J) Preventive Treatment. Fluoride treatment may be covered but is limited to the application of stannous fluoride or acid phosphate fluoride. Sodium fluoride treatments are not covered. Fluoride treatment shall include both the upper and lower arch and shall be a separate service from prophylaxis. Fluoride treatment for recipients under age twenty-one (21) is covered. Fluoride treatment for recipients age twenty-one (21) and over is limited to individuals with rampant caries, or those who are undergoing radiation therapy to head and neck, or those with diminished salivary flow, or individuals who are mentally retarded or have cemental or root surface caries secondary to gingival recession. For recipients ages five through twenty (5–20), topical application of sealants as outlined in Section 19 of the Medicaid Dental Manual is covered. Dietary planning, oral hygiene instruction and training in preventive dental care are not covered;]*

*[(K)] (C) Hospital Dental Care. Dental services provided in an inpatient hospital or an outpatient hospital place of service are subject to the same general benefits and limitations applicable to all dental services and all are not selectively restricted based on place of service;]*

*[(L) Injections. Procedure codes for the injections which are covered shall be shown in Section 19 of the Dental Manual;]*

*[(M) Oral Surgery (or Other Qualified Dentist Specialist). Oral surgery is limited to medically necessary care. Cosmetic oral surgeries shall not be paid. Procedures as covered for a certified oral surgeon (or other qualified dentist specialist) shall be indicated in the Medicaid Dental Manual. A medically necessary oral surgery procedure not specifically listed in the Medicaid Dental Manual may be billed using the procedure code identified in the dental manual as Unspecified. The Unspecified procedure must be explained on the claim form.*

*[(N) Orthodontic Treatment/Space Management Therapy. Medically necessary minor orthodontic appliances for interceptive and oral development as listed in the Medicaid Dental Manual are covered. Fixed space maintainers are covered for the premature loss of deciduous teeth. Medically necessary orthodontic treatment and space maintainers for recipients under age twenty-one (21) is*



covered when indicated by an EPSDT screen and prior authorized;

(O) Periodontic Treatment. A gingivectomy or gingivoplasty is allowed for epileptic patients on Dilantin therapy, or medically necessary drug-induced hyperplasia. Limited occlusal adjustment is covered when it is necessary as emergency treatment. Other periodontic procedures are not covered;

(P) Prophylaxis (Preventive). Prophylaxis may be a covered service for the upper arch, the lower arch or both arches. Prophylaxis shall be a separate service from fluoride treatment and shall include scaling and polishing of the teeth;

(Q) Pulp Treatment (Endodontic). A pulpotomy on deciduous teeth is covered and shall include complete amputation of the vital coronal nerve, with placement of a suitable drug over the remaining exposed tissue. The fee excludes final restoration. Pulp vitality tests and pulp caps are not covered;

(R) Restorations (Fillings). Fees for any restorative care listed in the Medicaid Dental Manual apply whether the service is performed in the office, hospital, ambulatory surgical center or nursing facility. Amalgam fillings are covered for Class I, Class II and Class V restorations on posterior teeth. A maximum fee shall apply for any one (1) posterior tooth and shall include polishing, local anesthesia and treatment base. Silicate cement, acrylic or composite fillings are not covered for Class I and Class II restorations but are covered for Class III, Class IV and Class V restorations on anterior teeth. A maximum fee shall apply for any one (1) anterior tooth and shall include polishing, local anesthesia and treatment base. Fillings of other materials are not covered, except when a sedative filling is necessary as emergency treatment. X rays may be covered;

(S) Root Canal Therapy (Endodontic). Root canal therapy is a covered service for permanent teeth. The fee excludes final restoration but includes all in treatment X rays. Pre-operative and postoperative X rays may be reimbursed. An apicoectomy is a covered service for permanent teeth but not on the same day as a root canal. Excluding a pulpotomy, other endodontic procedures are not covered; and

(T) X rays. X rays shall not be submitted routinely with a request for prior authorization or with a claim, unless the practitioner shall have been specifically requested to submit X rays. X rays shall be taken at the discretion of the dental practitioner. Films which are not of diagnostic value shall not be claimed. X rays to be covered shall be of the intraoral type, except when a panoramic-type film is required. A preoperative full-mouth X-ray survey of permanent or deciduous teeth, or mixed dentition, is covered as described in the Medicaid Dental Manual. Medically necessary X rays of an edentulous mouth are covered.]

**AUTHORITY:** sections 208.152, [RSMo Cum Supp. 1990,] 208.153, [RSMo Cum. Supp. 1991] and 208.201, RSMo [Supp. 1987] 2000. This rule was previously filed as 13 CSR 40-81.040. Original rule filed Jan. 21, 1964, effective Jan. 31, 1964. For intervening history, please consult the *Code of State Regulations*. Emergency amendment filed June 27, 2002, effective July 7, 2002, expires Feb. 27, 2003.

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 40—Optical Program**

**EMERGENCY AMENDMENT**

**13 CSR 70-40.010 Optical Care Benefits and Limitations—Medicaid Program.** The division is amending sections (1), (4), (6), (7), and (8).

**PURPOSE:** This emergency amendment reflects a change in adult optical services. Eyeglasses will no longer be covered for adults, except one pair following cataract surgery.

**EMERGENCY STATEMENT:** Missouri's economic status requires emergency measures to contain costs wherever feasible. For SFY 2003, the state is projecting general revenue will be \$56 million less than actual net collections in SFY 2001. This does not take into account the impact of inflation. Assuming this projection is accurate, the state will have less money to operate than two (2) years ago while it must fund mandatory items such as Medicaid caseload growth. In order to meet the SFY 2003 projected revenue, the 91st General Assembly in House Bill IIII approved core reductions to adult optical services. Beginning July 1, 2002, eyeglasses will no longer be covered for adults (not children), except one (1) pair following cataract surgery. An emergency amendment is necessary to preserve the compelling governmental interest effectuating the changes reflected through the appropriation process. The Department of Social Services (DSS), Division of Medical Services must modify spending as provided for in HB IIII to more closely align expenditures with available revenues for SFY 2003. DSS is required to implement the actions of the legislature and the Governor. These actions are made clear through the bill, dollars appropriated and any subsequent letters of intent issued to clarify the legislature's actions. In SFY 2003, DSS must cut spending in identified programs, to preserve the compelling governmental interest reflected in the actions of the legislature that are designed to achieve a balanced state budget. The majority of these spending cuts must be implemented effective July 1, 2002 to give the greatest opportunity to achieve the savings projected through these program cuts or reductions for SFY 2003. The necessary projected savings cannot be acquired through the regular rulemaking process and, thus, requires emergency rulemaking. Promulgation of this emergency amendment is necessary to preserve the compelling governmental interest to modify spending to conform to monies appropriated. The scope of this emergency amendment is limited to the circumstances creating the emergency and complies with the protections extended in the *Missouri and United States Constitutions*. The division believes this emergency amendment is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 27, 2002, effective July 7, 2002 and expires February 27, 2003.

(1) Administration. The Optical Care program shall be administered by the Division of [Family] Medical Services, Department of Social Services. The optical care services covered and not covered, the program limitations and the maximum allowable fees for all covered services shall be determined by the Division of [Family] Medical Services and shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual. Services covered shall include only those which are clearly shown to be medically necessary.

(4) Types of Service Reimbursed by Medicaid for Each Profession.

(A) Optometrist or Optometric Clinic.

1. Eye examinations.
2. Eyeglasses for adults, only following cataract surgery.
3. Artificial eyes.
4. Special ophthalmological services.

(B) Opticians or Optical Dispensers.

1. Eyeglasses for adults, only following cataract surgery.
2. Artificial eyes.

(D) Physicians (MD or DO).



1. Eye examinations.
2. Eyeglasses **for adults, only following cataract surgery.**
3. Artificial eyes.
4. Special ophthalmological services.

(6) Covered Services.

(C) Glasses (frames and lenses, under 4.00 diopters **for adults, only following cataract surgery.**)

[(D)] *Frames.*

[(E)] *Temple.*

[(F)] *Lenses, single vision.*

[(G)] *Lenses, bifocal, Kryptok.*

[(H)] *Lenses, bifocal, Flat top.*

[(I)] *Lenses, bifocal, Executive.*

[(J)] *Lenses, trifocal.]*

[(K)] **(D)** Lenses, cataract.

[(L)] **(E)** Special frames (prior authorization required).

[(M)] **(F)** Special lens (medical necessity required).

[(N)] **(G)** Miscellaneous repairs (medical necessity required).

[(O)] **(H)** Scleral shell, stock or custom.

[(P)] **(I)** Artificial eye, stock or custom.

[(Q)] **(J)** Artificial eye, refitting.

[(R)] **(K)** Artificial eye prosthesis check/polishing/cleaning.

[(S)] **(L)** Rose I and Rose II tints (medical necessity required).

[(T)] **(M)** Photochromatic (prior authorization required).

[(U)] **(N)** Orthoptic and/or pleoptic training, with continuing optometric direction and evaluation (visual therapy/training) (prior authorization required).

[(V)] **(O)** Fitting of contact lens for treatment of disease, including supply of lens (therapeutic bandage lens) (medical necessity required).

[(W)] **(P)** Visual field examination with optometric diagnostic evaluation; tangent screen, Autoplot or equivalent (prior authorization required).

[(X)] **(Q)** Electro-oculography, with medical diagnostic evaluation (prior authorization required).

[(Y)] **(R)** Visually evoked potential (response) study, with medical diagnostic evaluation (prior authorization required).

[(Z)] **(S)** Quantitative perimetry, for example, several isopters on Goldmann perimeter or equivalent (prior authorization required).

[(AA)] **(T)** Static and kinetic perimetry or equivalent.

[(BB)] **(U)** Serial tonometry with optometric diagnostic evaluation (separate procedure), one (1) or more sessions, same day.

[(CC)] **(V)** Tonography with optometric diagnostic evaluation, recording indentation tonometer method or perilimbal suction method.

[(DD)] **(W)** Color vision examination, extended, for example, anomaloscope or equivalent.

[(EE)] **(X)** Dark adaptation examination, with optometric diagnostic evaluation.

(7) Program Limitations.

[(D)] *Eyeglasses are covered by Medicaid when the prescription is at least 0.75 diopters for one (1) eye or 0.75 diopters for each eye.*

[(E)] *Only one (1) pair of eyeglasses is allowed every two (2) years (within any twenty-four (24)-month period of time) for all Medicaid recipients regardless of age.*

[(F)] *All claims for eyeglasses or lenses must contain the prescription and the name of the prescribing physician (MD or DO) or optometrist (OD).*

[(G)] *The original eyeglass prescription and laboratory invoices listing costs for optical materials, lenses and/or frames provided; and the charge for grinding, edging or assembling of glasses must be kept on file by the provider for five (5) years and furnished to DOSS upon request.*

[(H)] *Special frames are covered under the Missouri Medicaid program if they are required for medical reasons*

*and are prior authorized by DOSS. Special frames may be authorized if the patient requires special lenses (over 4.00 diopters for one (1) eye or over 4.00 diopters for each eye and are extra thick or heavy), the structure of the patient's face requires special frames (a very large face, wide-set eyes) or the patient needs glasses with pads because of nose surgery. The Prior Authorization Request Form must be completed and signed by the prescribing physician or optometrist.*

[(I)] *Special lenses are covered under the Missouri Medicaid program if they are medically justified and the prescription is plus or minus 4.00 diopters for one (1) eye or 4.00 diopters for each eye, cataract lenses or special bifocal lenses (for example, plastic Executive lenses). A Medical Necessity Form stating the reason special lenses are required must be completed and signed by the prescribing physician or optometrist and attached to the claim form.*

[(J)] *Plastic lenses may be dispensed under the Missouri Medicaid program. Reimbursement will be at the same rate as comparable glass lenses. Additional payment will be allowed for plastic lenses that meet the definition of special lenses and are medically justified.*

[(K)] *Photochromatic lenses are covered only if medically necessary and prior authorized by the DOSS Medical Consultant. The Prior Authorization Request Form must be completed and signed by the prescribing physician or Optometrist.*

[(L)] *Tinted lenses (Rose I and Rose II) are covered if medically necessary. A Medical Necessity Form completed and signed by the prescribing physician or optometrist must be attached to the claim form for the glasses.*

[(M)] *Replacement of optical materials and repairs in excess of program limitations may be covered if medically necessary or required for employment training, or educational purposes as follows:*

1. *Replacement of complete eyeglasses (frames and lenses)—Prior authorization required.*

A. *Lenses and frames broken (recipient must show provider the broken glasses or Medicaid will not pay for the glasses).*

B. *Lost.*

C. *Destroyed.*

D. *Stolen.*

E. *Repair of existing glasses would exceed the Medicaid allowable amount for new frames and lenses;*

2. *Lenses—Medical Necessity Form required.*

A. *Scratched.*

B. *Broken.*

C. *Prescription change or at least 0.50 diopters or greater (old and new prescription must appear on the Medical Necessity and claim forms); or*

3. *Frames—Prior authorization required. Temples, fronts or both broken and repair would exceed the Medicaid allowable amount for new frames.*

[(N)] *Repair of frames or replacement of parts of frames (temples) are covered as follows (Medical Necessity Form required):*

1. *The cost of the repairs do not exceed the Medicaid allowable amount for new frames; and*

2. *Repair would provide a serviceable frame for the recipient.*

[(O)] *Temples may never be billed in addition to complete new eyeglasses and new frames.*

[(P)] **(D)** *Prior authorization is required for all optical services for Missouri Medicaid recipients residing in a nursing home, boarding home or domiciliary home when the service is provided in the nursing home. The provider must submit a Prior*

Authorization Request Form to DOSS before the service is provided in order for Medicaid payment to be made.

[(Q)] (E) An eye refraction is included in the reimbursement for a comprehensive or limited eye examination. Because the eye refraction is not covered by Medicare but is covered by Medicaid, providers may bill Medicaid for an eye refraction when the patient has Medicare and Medicaid coverage.

[(R)] (F) Eyeglasses may be covered by Medicaid for *[a prescription of less than 0.75 diopters if medically necessary. A Medical Necessity Form must be completed by the prescribing physician or optometrist and attached to the claim form. Eyeglasses less than 0.75 diopters will be approved for the following reasons:]* **adults following cataract surgery.**

1. *Child under age eighteen (18) who requires glasses for school performances;*

2. *Visual acuity 20/40 or less; or*

3. *Protective eyewear for persons with sight in only one (1) eye.]*

[(S)] (G) Any warranties extended by optical companies for optical materials to private-pay patients must also apply to those same materials dispensed to Medicaid recipients.

[(T)] (H) Medicaid allows one (1) artificial eye per eye (one (1) left and one (1) right) within a five (5)-year period. If the artificial eye is lost, destroyed, cracked or deteriorated, payment will be allowed for replacement if a Medical Necessity Form is completed and attached to the claim.

[(U)] (I) Optometrist may be reimbursed for visual therapy training when there is a prognosis for substantial improvement or correction of an ocular or vision condition. These conditions include amblyopia, eccentric (nonfoveal) monocular fixation, suppression, inadequate motor or sensory fusion and strabismus (squint). Orthoptic and pleoptic training must be prior authorized by the DOSS Optometric Consultant. The number of training sessions are limited to one (1) per day, two (2) per week and a maximum of twenty (20) sessions may be requested on the Prior Authorization Request Form. If the patient shows significant improvement after the initial twenty (20) sessions and the optometrist feels that further progress could be made, DOSS may grant prior authorization for additional training sessions not to exceed a total of forty (40) sessions.

[(V)] (J) Fitting of contact lens for treatment of disease, including supply of lens (therapeutic bandage lens) is covered if it is prescribed by a physician, (MD or DO), as a bandage to cover a diseased condition of the eye, such as a bandage over an abrasion of the skin. The lens must be plain with no corrective power. Diagnosis for which the lens should be reimbursed are Bullous Keratopathy, Corneal Ulcers, Ocular Pemphigoid and other corneal exposure problems. A Medical Necessity Form completed and signed by the prescribing physician must be attached to the claim form.

[(W)] (K) Visual field examination with optometric diagnosis evaluation, tangent screen, Autoplot or equivalent, are covered when performed by an optometrist and prior authorized by DOSS. The following criteria will be considered in granting prior authorization:

1. Elevated intraocular pressure;
2. Best corrected visual acuity of 20/40 or less in either eye;
3. Headaches not attributed to refractive error; and
4. Reduction of confrontation fields.

[(X)] (L) Quantitative perimetry, for example, several isopters on Goldmann perimeter, or equivalent is covered.

[(Y)] (M) Serial tonometry with optometric diagnostic evaluation (separate procedure), one (1) or more sessions on the same day is covered when performed by an optometrist. Routine tonometry is included in the reimbursement for a comprehensive examination and cannot be billed separately.

(8) Noncovered Services.

(W) Eyeglasses for adults, except one (1) pair following cataract surgery.

*AUTHORITY: section 207.020, RSMo [1986] 2000. This rule was previously filed as 13 CSR 40-81.170. Emergency rule filed April 10, 1981, effective April 20, 1981, expired July 10, 1981. Original rule filed April 10, 1981, effective July 11, 1981. Emergency amendment filed June 27, 2002, effective July 7, 2002, expires Feb. 27, 2003.*

## Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES

### Division 20—Division of Environmental Health and Communicable Disease Prevention

#### Chapter 20—Communicable Diseases

#### EMERGENCY AMENDMENT

**19 CSR 20-20.040 Measures for the Control of Communicable, Environmental and Occupational Diseases.** This emergency amendment deletes section (6).

*PURPOSE: This amendment is to remove the sunset clause on this rule in order to continue to define investigative and control measures for communicable, environmental, and occupational diseases.*

*EMERGENCY STATEMENT: Section 192.020 mandates that the Missouri Department of Health and Senior Services (DHSS) safeguard the health of the people in the state and all its subdivisions; study the causes and prevention of diseases; designate those diseases which are infectious, contagious, communicable or dangerous; and make such orders, findings, rules and regulations to prevent the entrance and spread of such infectious, contagious and communicable disease into this state. This rule gives the director the legal means necessary to control, investigate, or both, any disease or condition listed in 19 CSR 20-20.020 that is a threat to the public health. This rule is a continuation of the longstanding, well proven, public health tools that have served the people for many decades to monitor and prevent outbreaks and control the spread of disease. The methods of investigation and control of communicable disease as listed in this rule are well established in the field of epidemiology and infectious diseases and are based on the recommendations and guidance from the Department of Health and Human Services, Centers for Disease Control and Prevention. These methods serve to protect the health of Missouri citizens against infectious, contagious and communicable diseases transmittable by contact with persons infected or harboring such diseases. In 2001, 46 (provisional) institutional and community outbreaks and 30,786 cases of such diseases were reported in Missouri that required investigation and follow-up by the department and/or local health authority. Further, since September 11, 2001 and the following anthrax bioterrorist events, this rule provides additional protection for the public health and safety of Missouri citizens by setting forth the measures to prevent, investigate, and control illnesses associated with agents of bioterrorism. Without this rule, the citizens of Missouri are vulnerable to acts of bioterrorism in addition to infectious, contagious, and communicable diseases that are controllable through the application of current principles of infectious diseases control. Currently there is a sunset clause which provides that this rule is due to expire on June 30, 2002. As this rule is necessary for the continued implementation and administration of section 192.020, RSMo, the Missouri Department of Health and Senior Services finds an immediate danger to the public health and welfare and a compelling government interest, which requires emergency action to remove this sunset clause. A proposed amendment which covers the same material, is*

*published in this issue of the **Missouri Register**. The scope of this rule is limited to the circumstances creating the emergency and complies with the protection extended in the **Missouri** and the **United States Constitutions**. The Commission believes this emergency rule is fair to all interested persons and parties under the circumstances. This emergency amendment was filed June 13, 2002, effective July 1, 2002, and expires December 27, 2002.*

*[(6) This rule will expire on June 30, 2002.]*

*AUTHORITY: section 192.006[.1] and 192.020, RSMo [1994] 2000. This rule was previously filed as 13 CSR 50-101.050. Original rule filed July 15, 1948, effective Sept. 13, 1948. Rescinded and readopted: Filed Dec. 11, 1981, effective May 13, 1982. Amended: Filed Sept. 16, 1982, effective Jan. 14, 1983. Amended: Filed March 21, 1984, effective July 15, 1984. Amended: Filed June 2, 1988, effective Aug. 25, 1988. Amended: Filed Nov. 15, 1989, effective Feb. 11, 1990. Amended: Filed Aug. 14, 1992, effective April 8, 1993. Amended: Filed Sept. 15, 1995, effective April 30, 1996. Emergency amendment filed June 13, 2002, effective July 1, 2002, expires Dec. 27, 2002. A proposed amendment covering this same material is published in this issue of the **Missouri Register**.*

**U**nder this heading will appear the text of proposed rules and changes. The notice of proposed rulemaking is required to contain an explanation of any new rule or any change in an existing rule and the reasons therefor. This is set out in the Purpose section with each rule. Also required is a citation to the legal authority to make rules. This appears following the text of the rule, after the word "Authority."

**E**ntirely new rules are printed without any special symbology under the heading of the proposed rule. If an existing rule is to be amended or rescinded, it will have a heading of proposed amendment or proposed rescission. Rules which are proposed to be amended will have new matter printed in boldface type and matter to be deleted placed in brackets.

**A**n important function of the *Missouri Register* is to solicit and encourage public participation in the rule-making process. The law provides that for every proposed rule, amendment or rescission there must be a notice that anyone may comment on the proposed action. This comment may take different forms.

**I**f an agency is required by statute to hold a public hearing before making any new rules, then a Notice of Public Hearing will appear following the text of the rule. Hearing dates must be at least thirty (30) days after publication of the notice in the *Missouri Register*. If no hearing is planned or required, the agency must give a Notice to Submit Comments. This allows anyone to file statements in support of or in opposition to the proposed action with the agency within a specified time, no less than thirty (30) days after publication of the notice in the *Missouri Register*.

**A**n agency may hold a public hearing on a rule even though not required by law to hold one. If an agency allows comments to be received following the hearing date, the close of comments date will be used as the beginning day in the ninety (90)-day-count necessary for the filing of the order of rulemaking.

**I**f an agency decides to hold a public hearing after planning not to, it must withdraw the earlier notice and file a new notice of proposed rulemaking and schedule a hearing for a date not less than thirty (30) days from the date of publication of the new notice.

Proposed Amendment Text Reminder:

**Boldface text indicates new matter.**

*[Bracketed text indicates matter being deleted.]*

**Title 1—OFFICE OF ADMINISTRATION  
Division 10—Commissioner of Administration  
Chapter 11—Travel Regulations**

**PROPOSED AMENDMENT**

**1 CSR 10-11.010 State of Missouri Travel Regulations.** The Office of Administration is amending sections (3), (15), (17) and (19), deleting section (10) and renumbering the remaining sections accordingly.

*PURPOSE: These amendments reflect a change to the travel regulations for meal reimbursements and travel outside the state by privately-owned automobiles in lieu of air that could result in savings to the state.*

(3) Officials and employees will be allowed travel expenses when required to travel away from their official domicile on state business. *[In instances where employees incur breakfast or evening meals when leaving and returning to their official domicile, they should indicate on their expense report that an early departure or late arrival was required to conduct state business.] To qualify for reimbursement for meal(s), officials and employees must be in continuous travel status for twelve (12) hours or more. Officials and employees shall indicate on their expense report the twelve (12)-hour status, if no overnight lodging is listed.* Mileage reimbursement for official use of a private motor vehicle may be claimed within the official domicile.

*[(10) In certain situations (as in the metropolitan areas of Kansas City, St. Joseph, St. Louis and Springfield) where it is clearly economical or advantageous to the state, the Office of Administration may authorize reimbursement for meals for employees traveling on state business in the area, regardless of the location of their official domicile. Generally, this will include the noon meal only. This shall apply only to employees who by the nature of their jobs are required to travel and are reimbursed while on state business in their official domicile.]*

*[(11)] (10)* State employees and officials may be reimbursed for travel expenses incurred for other employees or nonemployees provided the specific business reason necessary for doing so is indicated along with the names of those involved. This is intended to be used for those common types of travel situations where it is normal and practical for one (1) individual to pay for an expense rather than be divided among all individuals. Examples may be a restaurant bill or hotel charge for which a room was shared. Reimbursement for spouse expenses at an official business function requires a written justification preapproved by the commissioner of administration. This reimbursement is limited to elected officials, judges and department directors or those designated to represent them and must be for a legitimate business reason where attendance of the spouse is required to represent the state. State employees and officials may be reimbursed for expenses incurred by their spouses or other members of their families only as provided for concerning transportation to and from the airport in section (9) ((travel rule) (9)), relocation expenses in section *[(20)] (19)* ((travel rule) *[(20)] (19)*) and representing the state at an official business function in section *[(11)] (10)* ((travel rule) *[(11)] (10)*)).

*[(12)] (11)* The following rules shall apply for allowances for travel in privately-owned automobiles, privately-owned and rented aircraft, and aircraft charters:

(A) For travel in privately-owned automobiles, the state mileage allowance shall be at the current rate ordered by the commissioner of administration pursuant to section 33.095, RSMo. Any changes to the mileage allowance rate will be effective on July 1. Contact your agency fiscal office for the current authorized rate. Mileage figures listed on the Monthly Expense Report Form shall be rounded to the nearest whole mile. Toll charges for bridges and turnpikes as well as parking charges will also be allowed. When more than one (1) person travels in the same automobile, only the owner of the vehicle shall be allowed mileage. The state mileage allowance rate represents full compensation for the costs of operating your vehicle. Physical damage or loss to your private vehicle and/or its personal property contents is not covered by the state. Coverage should be obtained through personal auto insurance. Liability to others, including passengers, must be covered by your private auto policy. Refer to your policy or contact your agent for

coverage specifics concerning use of your private vehicle for business activities;

(B) For travel in privately-owned or rented aircraft, the employee shall be reimbursed a mileage allowance at a rate of twenty-four and one-half cents (24 1/2¢) per mile. The mileage shall be determined by the number of air miles. When more than one (1) person travels in the same aircraft, only the employee who owned or rented the aircraft shall receive the mileage allowance;

(C) For travel in a chartered aircraft (chartered from a nonaffiliated party and piloted by the charter service), prior authorized approval shall be obtained from the Office of Administration. That approval shall be limited to a reasonable rate based upon the mileage and size of the aircraft needed. When submitted as a reimbursement request, proper receipts shall be attached to the expense report; and

(D) For travel by rented auto, the employee will be reimbursed the actual cost of the rental plus fuel. Direct billing is not allowed. Weekly car rental rates will be allowed if the cost is less than the total cost of renting at the daily rate. The State Legal Expense Fund provides liability coverage for the usage of rental vehicles for official state business. For that reason, employees will not be reimbursed for any car rental insurance incurred. Usage of rental vehicles for personal activities is not covered by the Legal Expense Fund. Employees must provide at their own expense insurance coverage for personal use of rental vehicles. The Office of Administration Risk Management Section publishes a *Guide for Drivers on State Business* which describes procedures to follow should an accident occur.

**[[13]] (12)** The following rules shall apply for allowances for travel in state-owned vehicles:

(A) Expenses for gasoline, oil, storage, washing, greasing and other necessary services will be allowable as long as proper receipts are attached to the expense report;

(B) Charges for garaging state-owned vehicles shall be allowable for officials and employees at their official domicile providing—

1. That the state has no available facilities for garaging;
2. That the garage used is not owned by the employee or immediate family;
3. That the cost of the garage rental is not included in the rental charge for the living quarters of the state official or employee; and
4. That storage is reasonable in amount, necessary and to the advantage of the state; and

(C) State-issued credit cards for state-owned vehicles shall be used with those companies that have agreed to accept the credit cards. Payments to oil companies covering credit card purchases should be listed on the warrant request. These payments must be supported by the statement received from the company and accompanied by gasoline purchase charge slips. Gasoline purchases with state credit cards will not be listed on the expense report.

**[[14]] (13)** An officer or employee whose resident city is in some place other than the city of the official domicile shall not be allowed expenses while in such resident city or mileage to travel between the resident city and the city of the official domicile. Reimbursement may be made for a meal charge within the city of residence if incurred as part of a department or agency sponsored conference or business meeting as described in section **[[15]] (14)** ((travel rule) **[[15]] (14)**). Travel expenses shall be reimbursed and computed between the travel site destination and the employee's official domicile or residence, if leaving directly from the residence, whichever is less. Any additional travel expenses incurred by reason of an employee or official choosing to reside in a place other than the city of the official domicile is not allowed. The city/town or place of official domicile must be listed on the monthly expense report.

**[[15]] (14)** No official or employee shall be allowed hotel or meals while in their city of official domicile, except as provided in *section (10) ((travel rule) (10)) and* this section **[[15]] (14)** ((travel rule) **[[15]] (14)**). While traveling on state business, employees and officials will not be allowed hotel expenses when it would be more economical and advantageous to the state to return to their residence. Reimbursement or direct billing may be made for agency-provided meal expenses within the city of official domicile when it is incurred as part of a department or agency required meeting or a department sponsored conference. This represents meals served to officers and employees at conferences and meetings who are interacting and conducting state business during the meal period. Direct billing and reimbursement of meals served in conjunction with agency required meetings attended by in-domicile employees shall be documented with the names of those involved or the group name with the number attending and the specific state business reason for the meeting. The state business reason can be documented in the form of an agenda, program, or other specific description.

**[[16]] (15)** The following procedures will be utilized in submitting claims for reimbursement:

(A) All claims must be prepared on a typewriter or in ink. The original shall be filed with the Office of Administration;

(B) Descriptive invoices for lodging, conference registration, airline/air charter, bus and rail transportation billed directly to the state must be submitted on a warrant request with a copy of an approved Out of State Travel Authorization Form, if applicable, attached to each invoice;

(C) Where charges for transportation, lodging, and conference registrations are not billed directly to the state, the following documentation is required for reimbursement:

1. Reimbursement for transportation must be supported by a vendor document describing the travel and a proof of payment;
2. Reimbursement for lodging must be supported with a hotel document indicating the lodging specifics and a proof of payment;
3. Reimbursement for conference registrations must be supported by a descriptive vendor document and a proof of payment;
4. Proof of payment may be in the form of a vendor receipt or a vendor marking on the invoice document that the charge has been paid. Proof of payment may also be in the form of a credit card receipt, credit card statement copy showing the charge, or a copy of a personal check that has been canceled by the bank; and
5. Fiscal personnel must verify that travel reimbursement claims are correct before submitting the claim to the Office of Administration. Primary responsibility for authenticating travel reimbursement claims rests with the department and agency directors;

(D) Any unusual expenses incurred shall be itemized on the expense report and accompanied by receipts for payment. The justification for incurring any unusual expenses shall be fully explained by letter or notation on the expense report form;

(E) Each monthly expense report shall be limited to cover expenses incurred during a one (1)-month period. The Office of Administration will not accept more than one (1) monthly expense report per individual per month. The expense reports must be rendered currently to facilitate prompt payment;

(F) Rubber stamps or facsimile signatures for the claimant on the expense report form shall not be honored unless otherwise provided by state law; and

(G) All claims for reimbursement of expenses must be itemized and attested to by the claimant and approved by the director of the department or as otherwise provided by state law.

**[[17]] (16)** The following additional rules shall apply to all travel outside the state that is necessary for the performance of official state business:

(A) All travel outside the state requires approval by the director, head of the department or their authorized representative. This rule shall not apply to members of the legislature or other legislative branch employees, judges and other judicial branch employees and elected officials of the executive branch and their employees;

(B) A copy of the approved Out of State Travel Authorization Form bearing the signature of the director, head of the department or his/her authorized representative shall be attached to the expense report for reimbursement for travel expenses incurred outside the state. The Out of State Travel Authorization Form must be the form approved by the Office of Administration and include, but not be limited to, the following information: name(s) of employee(s), destination, purpose of the trip, dates of travel, manner of transportation and estimated total expenses;

(C) Agencies shall include on one (1) Out of State Travel Authorization Form the names of all individuals requesting travel to the same place at the same date and for the same purpose. In these instances each employee must secure a copy of the authorization for submission with the monthly expense report; and

(D) Air travel shall be the primary method of transportation outside of the state unless other methods of travel are more economical or advantageous to the state. State agencies should plan their out of state travel by making advance air travel reservations to obtain the lowest convenient air fares. Air travel shall not, however, exceed coach fare for the most direct available route. Travel outside the state by commercial common carrier surface transportation, in lieu of air transportation, shall be limited to the actual cost of the surface carrier. *[Travel outside the state by privately-owned automobile, in lieu of air transportation, shall be limited to the state mileage allowance. The total mileage allowance cannot, however, exceed the highest cost coach air fare available at that time to the same destination. No meals, lodging or other travel expenses incurred as a result of taking surface transportation, in lieu of air, will be allowed.]* Travel outside the state by privately-owned automobile, in lieu of air transportation, shall be limited to the state mileage allowance plus any actual expenses which would have been allowed or provided if taking air transportation. The total allowable expenses cannot, however, exceed the reasonable coach airfare available at that time to the same destination. Travel outside of the state by rented automobile or state car, in lieu of air transportation, shall be limited to the cost of the rented car and necessary fuel. The Office of Administration may require a written justification for extensive travel out of state by privately-owned auto when the mileage allowance cost does not appear economical or advantageous to the state.

[[18]] (17) State department directors are authorized to promulgate and enforce regulations governing travel. Departmental regulations may be more restrictive than these regulations. Departmental regulations shall not grant expenses that are not allowed under the State of Missouri Travel Regulations.

[[19]] (18) The commissioner of administration or an authorized representative may approve unusual travel expenses not covered by these regulations or modify procedures for the payment of travel expenses. **The commissioner of administration may make exceptions to any of these regulations deemed appropriate and in the best interests of the state.** The *[need]* request for reimbursement of **exception travel expenses**, or of unusual travel expenses shall be made in writing to the Office of Administration.

[[20]] (19) Reimbursement for recruiting and relocation expenses for new or existing employees and their families will be made in accordance with the applicable department's policy. Before submitting any recruiting or relocation expenses, departments desiring to pay such expenses shall submit their policies to the commissioner of administration for approval. If a department does not sub-

mit a policy for approval, those expenses shall be paid based upon the Office of Administration employee relocation policy distributed to each department.

*AUTHORITY: section 33.090, RSMo [Supp. 1995] 2000. Original rule filed Jan. 22, 1974, effective Feb. 1, 1974. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003. Amended: Filed June 20, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of Administration, Laurie Hines, Assistant General Counsel, PO Box 388, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

### Title 3—DEPARTMENT OF CONSERVATION Division 10—Conservation Commission Chapter 5—Wildlife Code: Permits

#### PROPOSED AMENDMENT

**3 CSR 10-5.340 Resident Fishing Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the resident fishing permit from eleven dollars (\$11) to twelve dollars (\$12).*

To pursue, take, possess and transport fish, frogs, mussels, clams, turtles, crayfish and live bait. Fee: *[eleven]* twelve dollars *[( \$ 11 )]* (\$12).

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.235. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities five hundred eleven thousand three hundred fifty-three dollars (\$511,353) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation
Division: 10 Conservation Commission
Chapter: 5
Type of Rulemaking: Proposed amendment
Rule Number and Name: 3CSR 10-5.340 Resident Fishing Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
511,353 resident fishing permit buyers	N/A	\$511,353.00

**III. WORKSHEET**

511,353 resident fishing permit buyers X \$1.00 increase per permit sold = \$511,353.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed—normally within five years—to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.345 Resident Small Game Hunting Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE:* This amendment increases the fee of the resident small game hunting permit from nine dollars (\$9) to ten dollars (\$10).

To pursue, take, possess and transport birds (except wild turkey), mammals (except deer) and frogs, and to sell furbearers taken by hunting. Fee: ~~[nine]~~ **ten** dollars ~~[(~~\$9~~)]~~ **(\$10)**.

*AUTHORITY:* sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.255. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the **Code of State Regulations**. Amended: Filed June 5, 2002.

*PUBLIC COST:* This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST:* This proposed amendment will cost private entities fifty-six thousand five hundred fifty-nine dollars (\$56,559) in the aggregate.

*NOTICE TO SUBMIT COMMENTS:* Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.



**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation
Division: 10 Conservation Commission
Chapter: 5
Type of Rulemaking: Proposed amendment
Rule Number and Name: 3 CSR 10-5.345 Resident Small Game Hunting Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
56,559 resident hunting permit buyers	N/A	\$56,559.00

**III. WORKSHEET**

56,559 resident hunting permit buyers X \$1.00 increase per permit sold = \$56,559.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed--normally within five years--to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION  
Division 10—Conservation Commission  
Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.351 Resident Firearms Any-Deer Hunting Permit.**  
The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment addresses the addition of a statewide any-deer hunting permit, the elimination of the firearms deer hunting permit, and increases the fee of the resident firearms any-deer hunting permit from fifteen dollars (\$15) to seventeen dollars (\$17).*

To pursue, take, possess and transport *[an antlered deer statewide or]* a deer of either sex *[in a specified deer management unit]* **statewide** during the firearms deer hunting season[s]. Fee: *[Fifteen]* **Seventeen** dollars *[( \$ 15 )]* **(\$17)**.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 11, 1997, effective March 1, 1998. Amended: Filed July 8, 1998, effective March 1, 1999. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities seven hundred eleven thousand six hundred forty dollars (\$711,640) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation

Division: 10 Conservation Commission

Chapter: 5

Type of Rulemaking: Proposed amendment

Rule Number and Name: 3CSR 10-5.351 Resident Firearms Any-Deer Hunting Permit.

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
355,820 resident deer hunting permit buyers	N/A	\$711,640.00

**III. WORKSHEET**

355,820 resident deer hunting permit buyers X \$2.00 increase per permit sold = \$711,640.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed—normally within five years—to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION  
Division 10—Conservation Commission  
Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.359 Resident Managed Deer Hunting Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the resident managed deer hunting permit from fifteen dollars (\$15) to seventeen dollars (\$17).*

To pursue, take, possess and transport deer during a prescribed managed deer hunt. Fee: *[fifteen]* **seventeen** dollars *[( \$15 )]* **(\$17)**.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed July 8, 1998, effective March 1, 1999. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities twelve thousand two hundred eighty-six dollars (\$12,286) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation
Division: 10 Conservation Commission
Chapter: 5
Type of Rulemaking: Proposed amendment
Rule Number and Name: 3 CSR 10-5.359 Resident Managed Deer Hunting Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
6,143 managed deer hunting permit buyers	N/A	\$12,286.00

**III. WORKSHEET**

6,143 managed deer hunting permit buyers X \$2.00 increase per permit sold = \$12,286.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed--normally within five years--to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.360 Resident Archer's Hunting Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the resident archer's hunting permit from seventeen dollars (\$17) to nineteen dollars (\$19).*

To pursue, take, possess and transport deer and wild turkey during the fall deer and turkey archery season and small game during prescribed seasons, and to sell furbearers taken by hunting. Fee: *[seventeen]* **nineteen** dollars *[( \$ 17 )]* **( \$ 19 )**.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.260. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities one hundred ninety thousand two hundred sixty-four dollars (\$190,264) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation

Division: 10 Conservation Commission

Chapter: 5

Type of Rulemaking: Proposed amendment

Rule Number and Name: 3 CSR 10-5.360 Resident Archer's Hunting Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
95,132 resident archery hunting permit buyers	N/A	\$190,264.00

**III. WORKSHEET**

95,132 resident archery hunting permit buyers X \$2.00 increase per permit sold = \$190,264.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed—normally within five years—to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.365 Resident Turkey Hunting Permits.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the spring resident turkey hunting permit from fifteen dollars (\$15) to seventeen dollars (\$17) and the fall resident turkey hunting permit from eleven dollars (\$11) to thirteen dollars (\$13).*

(1) To pursue, take, possess and transport wild turkey during the prescribed open season.

(A) Spring Season Permit. Fee: [*fifteen*] **seventeen** dollars [*(\$15)*] **(\$17)**.

(B) Fall Season Permit. Fee: [*eleven*] **thirteen** dollars [*(\$11)*] **(\$13)**.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. This rule was previously filed as 3 CSR 10-5.266. This version of rule filed July 22, 1974, effective Dec. 31, 1974. For intervening history, please consult the Code of State Regulations. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities two hundred sixty-seven thousand twelve dollars (\$267,012) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*



**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation
Division: 10 Conservation Commission
Chapter: 5
Type of Rulemaking: Proposed amendment
Rule Number and Name: 3 CSR 10-5.365 Resident Turkey Hunting Permits

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
133,506 Turkey hunting permit buyers	N/A	\$267,012.00

**III. WORKSHEET**

133,506 turkey hunting permit buyers X \$2.00 increase per permit sold = \$267,012.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed--normally within five years--to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION  
Division 10—Conservation Commission  
Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.420 Youth Deer and Turkey Hunting Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment establishes a minimum age and increases the maximum age of those eligible to obtain a youth deer and turkey hunting permit and increases the fee of the permit from fifteen dollars (\$15) to seventeen dollars (\$17).*

To pursue, take, possess and transport one (1) *[antlered]* deer of either sex statewide, *[or one (1) antlerless deer in a deer management unit where any-deer permits are issued,]* during the firearms deer hunting seasons **except that only an antlerless deer may be taken in seasons open only to antlerless deer;** one (1) male turkey or turkey with visible beard during the spring turkey hunting season; and one (1) turkey of either sex during the fall firearms turkey hunting season; only by persons **at least six (6) and under *[twelve (12)] sixteen (16)* years of age *[while]* who are** hunting in the immediate presence of a properly licensed adult hunter who has in his/her possession a valid hunter education certificate card. Fee: *[fifteen] seventeen* dollars *[(~~\$15~~) (\$17)]*.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed May 6, 1998, effective March 1, 1999. Amended: Filed May 10, 1999, effective March 1, 2000. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities twenty thousand nine hundred forty-two dollars (\$20,942) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation

Division: 10 Conservation Commission

Chapter: 5

Type of Rulemaking: Proposed amendment

Rule Number and Name: 3 CSR 10-5.420 Youth Deer and Turkey Hunting Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
10,471 Youth deer and turkey hunting permit buyers	N/A	\$20,942.00

**III. WORKSHEET**

10,471 youth deer and turkey hunting permit buyers X \$2.00 increase per permit sold = \$20,942.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed--normally within five years--to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.440 Daily Fishing Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the daily fishing permit from five dollars (\$5) to five dollars and fifty cents (\$5.50).*

To pursue, take, possess and transport fish, frogs, mussels, clams, turtles, crayfish and live bait. Fee: five dollars **and fifty cents** (\$5.50) per day. A permit may be purchased for multiple days.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 20, 1995, effective Jan. 1, 1996. Amended: Filed July 8, 1998, effective March 1, 1999. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities one hundred fifty-three thousand four hundred sixteen dollars (\$153,416) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation

Division: 10 Conservation Commission

Chapter: 5

Type of Rulemaking: Proposed amendment

Rule Number and Name: 3 CSR 10-5.440 Daily Fishing Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
306,832 daily fishing permit buyers	N/A	\$153,416.00

**III. WORKSHEET**

306,832 daily fishing permit buyers X \$0.50 increase per permit sold = \$153,416.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed—normally within five years—to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION  
Division 10—Conservation Commission  
Chapter 5—Wildlife Code: Permits**

**PROPOSED AMENDMENT**

**3 CSR 10-5.445 Daily Small Game Hunting Permit.** The commission proposes to amend provisions of this rule.

*PURPOSE: This amendment increases the fee of the daily small game hunting permit from ten dollars (\$10) to eleven dollars (\$11).*

To chase, pursue, take, possess and transport birds (except wild turkey), mammals (except deer and furbearers) and frogs, and to chase furbearers for training dogs during the closed season. Fee: ~~ten~~ **eleven** dollars ~~[( \$ 10 )]~~ **( \$ 11 )** per day. A permit may be purchased for multiple days.

*AUTHORITY: sections 40 and 45 of Art. IV, Mo. Const. Original rule filed June 20, 1995, effective Jan. 1, 1996. Amended: Filed April 25, 1996, effective March 1, 1997. Amended: Filed July 8, 1998, effective March 1, 1999. Amended: Filed June 5, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will cost private entities fourteen thousand two hundred eighteen dollars (\$14,218) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the **Missouri Register**. No public hearing is scheduled.*

**FISCAL NOTE  
PRIVATE ENTITY COST**

**I. RULE NUMBER**

Title: 3 - Department of Conservation

Division: 10 Conservation Commission

Chapter: 5

Type of Rulemaking: Proposed amendment

Rule Number and Name: 3 CSR 10-5.445 Daily Small Game Hunting Permit

**II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule:	Classification by types of the business entities which would likely be affected:	Estimate in the aggregate as to the cost of compliance with the rule by the affected entities:
14,218 daily hunting permit buyers	N/A	\$14,218

**III. WORKSHEET**

14,218 daily hunting permit buyers X \$1.00 increase per permit sold = \$14,218.00 aggregate cost

**IV. ASSUMPTIONS**

Number of permit buyers is based on historic sales data.

Based on Permit Year (March 1 through last day of February next following) NOT fiscal year.

Based on an average five-year life cost. All permit fees are reviewed annually and adjustments made as needed—normally within five years—to remain competitive with other states.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 11—Wildlife Code: Special Regulations for**  
**Department Areas**

**PROPOSED AMENDMENT**

**3 CSR 10-11.150 Target Shooting and Shooting Ranges.** The commission proposes to amend provisions of this rule.

*PURPOSE:* This amendment requires the use of paper targets attached only to provided target holders on the rifle/pistol portion of unmanned shooting ranges, and for clarification, restricts use of targets on designated shotgun-only portions of ranges to clay targets.

Target shooting is permitted only on designated public shooting ranges or by special use permit. Range use shall be in accordance with posted *[instructions]* **range rules** or as directed by the range officer **listed on the special use permit**, and is contingent upon the right to inspect permits, firearms and ammunition by an agent of the department or certified law enforcement officer. **Only paper targets attached to provided target holders may be used on unmanned target shooting ranges, except that on portions of shooting ranges restricted to shotguns with shotshells, only clay targets may be used.** Use of incendiary, including tracer *[rounds]* **ammunition**, armor piercing or explosive ammunition is prohibited. Fully automatic *[weapons]* **firearms** are permitted only with a special use permit. Range use fees are required at some areas. Possession of alcoholic beverages is prohibited on all ranges and associated parking lots. Groups of more than ten (10) people must obtain a special use permit prior to use of a range.

*AUTHORITY:* sections 40 and 45 of Art. IV, Mo. Const. This rule previously filed as 3 CSR 10-4.115. Original rule filed April 30, 2001, effective Sept. 30, 2001. Amended: Filed June 5, 2002.

*PUBLIC COST:* This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST:* This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS:* Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 3—DEPARTMENT OF CONSERVATION**  
**Division 10—Conservation Commission**  
**Chapter 11—Wildlife Code: Special Regulations for**  
**Department Areas**

**PROPOSED AMENDMENT**

**3 CSR 10-11.182 Deer Hunting.** The department proposes to amend section (3) of this rule.

*PURPOSE:* This amendment addresses addition of a statewide youth-only portion of firearms deer hunting season.

(3) During the **Youth-Only**, November and December portions of the firearms deer hunting season, only antlered deer may be taken or possessed on the department areas listed below. Antlerless deer may not be taken on a firearms deer hunting permit.

- (A) Apple Creek Conservation Area
- (B) Ben Cash Conservation Area**
- [(B)]***(C) Buffalo Hills Natural Area**
- [(C)]***(D) Busiek State Forest and Wildlife Area**
- (E) Chalk Bluff Trails Access**
- [(D)]***(F) Compton Hollow Conservation Area**
- [(E)]***(G) Daniel Boone Conservation Area**
- [(F)]***(H) Danville Conservation Area (Baldwin, Schulze and Thornhill Annexes)**
- [(G)]***(I) Davisdale Conservation Area**
- (J) Donaldson Point Conservation Area**
- (K) Gayoso Bend Conservation Area**
- [(H)]***(L) General Watkins Conservation Area**
- (M) Girvin Conservation Area**
- [(I)]***(N) Indian Trail Conservation Area**
- [(J)]***(O) J.N. "Turkey" Kearn Memorial Wildlife Area**
- [(K)]***(P) Lamine River Conservation Area**
- [(L)]***(Q) Little Indian Creek Conservation Area**
- [(M)]***(R) Little Lost Creek Conservation Area**
- [(N)]***(S) Long Ridge Conservation Area**
- [(O)]***(T) Maintz Wildlife Preserve**
- (U) Oak Ridge Conservation Area**
- [(P)]***(V) Ralph and Martha Perry Memorial Conservation Area**
- [(Q)]***(W) Pleasant Hope Conservation Area**
- [(R)]***(X) Ranacker Conservation Area**
- [(S)]***(Y) Red Rock Landing Conservation Area**
- [(T)]***(Z) Frank Reifsnider State Forest**
- [(U)]***(AA) River 'Round Conservation Area**
- [(V)]***(BB) Seventy-Six Conservation Area**
- [(W)]***(CC) Robert E. Talbot Conservation Area**
- (DD) Wilhemina Conservation Area**
- (EE) Wolf Bayou Conservation Area**

*AUTHORITY:* sections 40 and 45 of Art. IV, Mo. Const. This rule previously filed as 3 CSR 10-4.115. Original rule filed April 30, 2001, effective Sept. 30, 2001. Amended: Filed Aug. 30, 2001, effective Jan. 30, 2002. Amended: Filed May 9, 2002. Amended: Filed June 5, 2002.

*PUBLIC COST:* This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

*PRIVATE COST:* This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

*NOTICE TO SUBMIT COMMENTS:* Anyone may file a statement in support of or in opposition to this proposed amendment with John W. Smith, Deputy Director, Department of Conservation, PO Box 180, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 8—DEPARTMENT OF LABOR AND**  
**INDUSTRIAL RELATIONS**  
**Division 10—Division of Employment Security**  
**Chapter 4—Unemployment Insurance**

**PROPOSED RULE**

**8 CSR 10-4.180 Coverage of Indian Tribes**

*PURPOSE:* This rule implements the federally mandated coverage of Indian tribes under the Missouri Employment Security Law, Chapter 288, RSMo.



(1) Definitions. As used in this rule, except as otherwise required for the content, the following terms shall have the meanings ascribed:

(A) Director—The administrative head of the Division of Employment Security.

(B) Division—The Division of Employment Security.

(C) Indian tribe—The meaning given to such term in section 3306 of the Federal Unemployment Tax Act (26 U.S.C. 3306).

(D) Employer—Includes any Indian tribe for which service in employment as defined in section 288.034, RSMo is performed.

(E) Employment—Includes service performed in the employ of an Indian tribe, provided such service is excluded from employment as defined in the Federal Unemployment Tax Act solely by reason of section 3306(c)(7) of the Federal Unemployment Tax Act, and is not otherwise excluded from employment under Chapter 288, RSMo. For purposes of this rule, the exclusions from employment in subsection 9 of section 288.034, RSMo shall be applicable to services performed in the employ of an Indian tribe.

(2) Benefits. Benefits based on service in employment of an Indian tribe shall be payable in the same amount, on the same terms and subject to the same conditions as benefits payable on the basis of other service subject to Chapter 288, RSMo. The provisions of subsection 3 of section 288.040, RSMo pertaining to services performed at an educational institution while in the employ of an “educational service agency” shall apply to services performed in an educational institution or educational service agency wholly owned and operated by an Indian tribe or tribal unit.

(3) Contributions. Indian tribes or tribal units (subdivisions, subsidiaries or business enterprises wholly owned by such Indian tribes) subject to this chapter shall pay contributions under the same terms and conditions as all other subject employers, unless they elect to pay into the state unemployment fund amounts equal to the amount of benefits attributable to service in the employ of the Indian tribe. An Indian tribe and all tribal units of such Indian tribe shall be jointly and severally liable for any and all contributions, payments in lieu of contributions, interest, penalties, and surcharges owed by the Indian tribe and all tribal units of such Indian tribe.

(4) Payments in Lieu of Contributions. Indian tribes electing to make payments in lieu of contributions must make such election in the same manner and under the same conditions as provided in subsection 3 of section 288.090, RSMo pertaining to state and local governments and nonprofit organizations subject to Chapter 288, RSMo. Indian tribes will determine if reimbursement for benefits paid will be elected by the tribe as a whole, by individual tribal units, or by combinations of individual tribal units. Termination of an Indian tribe’s coverage pursuant to subsection (C) of this section shall terminate the election of such Indian tribe and any tribal units of such Indian tribe to make payments in lieu of contributions.

(A) Indian tribes or tribal units will be billed for the full amount of benefits attributable to service in the employ of the Indian tribe or tribal unit on the same schedule as other employing units that have elected to make payments in lieu of contributions.

(B) Any Indian tribe or tribal unit that elects to become liable for payments in lieu of contributions shall be required, prior to the effective date of its election, to post with the division a surety bond issued by a corporate surety authorized to do business in Missouri in an amount equivalent to the contributions or payments in lieu of contributions for which the Indian tribe or tribal unit was liable in the last calendar year in which it accrued contributions or payments in lieu of contributions, or one hundred thousand dollars (\$100,000), whichever amount is the greater, to ensure prompt payment of all contributions or payments in lieu of contributions, interest, penalties and surcharges for which the Indian tribe or trib-

al unit may be, or becomes, jointly and severally liable pursuant to this chapter.

(C) Failure of the Indian tribe or tribal unit to maintain the required surety bond, including the posting of an additional surety bond or a replacement surety bond within ninety (90) days of being directed by the division, will cause services performed for such Indian tribe to not be treated as “employment” for purposes of Chapter 288, RSMo.

(D) The director may determine that any Indian tribe that loses coverage under subsection (C) of this section, may have services performed for such tribe again included as “employment” for purposes of Chapter 288, RSMo if all contributions, payments in lieu of contributions, penalties, interest, and surcharges have been paid. Upon reinstatement of coverage under this subsection, an Indian tribe or any tribal unit may elect, in accordance with the provisions of this section, to make payments in lieu of contributions.

(E) If an Indian tribe fails to maintain the required surety bond by posting an additional surety bond or a replacement surety bond within ninety (90) days of being directed by the division, the director will immediately notify the United States Internal Revenue Service and the United States Department of Labor.

(F) Notices of surety bond deficiency to Indian tribes or their tribal units shall include information that failure to post an additional surety bond or a replacement surety bond within the prescribed time frame will cause:

1. The Indian tribe to be liable for taxes under the Federal Unemployment Tax Act;

2. The Indian tribe to be excepted from the definition of “employer,” as provided in section (1) of this rule, and services in the employ of the Indian tribe, as provided in section (1) of this rule, to be excepted from “employment.”

(5) Failure to Make Payments. Failure of the Indian tribe or tribal unit to make any payments required in Chapter 288, RSMo, including assessments of interest and penalty, within ninety (90) days of receipt of the bill will cause services performed for such Indian tribe to not be treated as “employment” for purposes of Chapter 288, RSMo.

(A) The director may determine that any Indian tribe that loses coverage under this section, may have services performed for such tribe again included as “employment” for purposes of Chapter 288, RSMo if all contributions, payments in lieu of contributions, penalties, interest, and surcharges have been paid.

(B) If an Indian tribe fails to make required payments (including assessments of interest and penalty) within ninety (90) days of a final notice of delinquency, the director will immediately notify the United States Internal Revenue Service and the United States Department of Labor.

(C) Notices of payment and reporting delinquency to Indian tribes or their tribal units shall include information that failure to make full payment within the prescribed time frame will cause:

1. The Indian tribe to be liable for taxes under the Federal Unemployment Tax Act;

2. The Indian tribe to be excepted from the definition of “employer,” as provided in section (1) of this rule, and services in the employ of the Indian tribe, as provided in section (1) of this rule, to be excepted from “employment.”

(6) Extended Benefits. Extended benefits paid that are attributable to service in the employ of an Indian tribe and not reimbursed by the federal government shall be financed in their entirety by such Indian tribe.

*AUTHORITY: section 288.220, RSMo 2000. Emergency rule filed June 13, 2002, effective July 1, 2002, expires Dec. 27, 2002. Original rule filed June 13, 2002.*

**PUBLIC COST:** This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

**PRIVATE COST:** This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.

**NOTICE TO SUBMIT COMMENTS:** Anyone may file a statement in support of or in opposition to this proposed rule with the Division of Employment Security, Gracia Y. Backer, Director, PO Box 59, Jefferson City, MO 65104-0059. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 12—DEPARTMENT OF REVENUE  
Division 30—State Tax Commission  
Chapter 3—Local Assessment of Property and Appeals  
From Local Boards of Equalization**

**PROPOSED RESCISSION**

**12 CSR 30-3.010 Appeals From the Local Board of Equalization.** This rule informed taxpayers of their right to protest an assessed value which s/he felt was unlawful, unfair, improper, arbitrary or capricious and the procedure for filing such protest.

**PURPOSE:** This rule is being rescinded because various text changes were numerous and the State Tax Commission believes that it is more efficient to rescind the rule than to amend it. A new rule to replace this rescinded rule is being filed simultaneously.

**AUTHORITY:** section 138.430, RSMo 1994. This rule previously was filed as 12 CSR 30-2.030. Original rule filed Dec. 13, 1983, effective March 12, 1984. Amended: Filed April 21, 1988, effective Sept. 11, 1988. Rescinded and readopted: Filed May 14, 1991, effective Oct. 31, 1991. Amended: Filed Aug. 23, 1995, effective Jan. 30, 1996. Rescinded: Filed June 12, 2002.

**PUBLIC COST:** This proposed rescission will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

**PRIVATE COST:** This proposed rescission will not cost private entities more than five hundred dollars (\$500) in the aggregate.

**NOTICE TO SUBMIT COMMENTS:** Anyone may file a statement in support of or in opposition to this proposed rescission with the State Tax Commission of Missouri, Rosemary P. Kaiser, Administrative Secretary, 621 East Capitol Avenue, Jefferson City, MO 65101. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.

**Title 12—DEPARTMENT OF REVENUE  
Division 30—State Tax Commission  
Chapter 3—Local Assessment of Property and Appeals  
From Local Boards of Equalization**

**PROPOSED RULE**

**12 CSR 30-3.010 Appeals From the Local Board of Equalization**

**PURPOSE:** This rule informs the local taxpayer of his/her right to protest by complaint or appeal an assessed value which s/he feels

is unlawful, unfair, improper, arbitrary or capricious and the procedure for filing these complaints or appeals.

(1) Every owner of real property or tangible personal property shall have the right to appeal from the decision of the local board of equalization, upon compliance with the following rules:

(A) This appeal shall be initiated by filing a complaint on forms prescribed by this commission and directed to the State Tax Commission. No complaint will be accepted unless on forms prescribed by this commission; provided, that any complainant may attach to commission forms any additional written pleading deemed appropriate by complainant. The complaint shall specify the name of the complainant; the business address of the complainant or an attorney to whom notice of hearing may be mailed; the legal description of the real property or the complete description of the tangible personal property at issue; a brief statement of the grounds upon which the assessment of the property is claimed to be unlawful, unfair, improper, arbitrary or capricious; a statement that the complainant had appealed to the proper local board of equalization; a statement of the relief to which complainant may feel entitled; if required under 12 CSR 30-3.025(3), a verified statement which states facts tending to demonstrate that the commission should reconsider the appropriateness of the value in the even-numbered year; and other information as shall be requested upon the commission forms;

(B) A complaint appealing a property assessment in counties of the first class, counties of charter government and the City of St. Louis shall be filed not later than August 15 or within thirty (30) days of the decision of the board of equalization, whichever is later. In all other counties, the complaint shall be filed not later than September 30 or within thirty (30) days of the decision of the board of equalization, whichever is later;

1. In any county or the City of St. Louis where the assessor fails to notify the owner of the property, or the predecessor in title or interest, of an initial assessment or an increase in assessment from the previous year, prior to the deadline for filing an appeal to the board of equalization, the owner may appeal directly to the State Tax Commission. Appeals under this paragraph shall be filed within thirty (30) days after a county official mailed a tax statement or otherwise first communicated the assessment or the amount of taxes to the owner or on or before December 31 of the tax year in question, whichever is later. Proof of late notice shall be attached to, or set forth in, the complaint.

2. A property owner who, due to lack of notice, files an appeal directly with the State Tax Commission after tax statements are mailed shall pay his or her taxes under protest pursuant to the requirements of section 139.031.1, RSMo, and the county collector shall upon receiving either the payment under protest or the notice specified in section 140.430, RSMo, impound all portions of taxes which are in dispute. Payment of taxes without a section 139.031.1, RSMo protest and prior to the time when the State Tax Commission's notice under section 138.430.4, RSMo is received by the county collector, will result in disbursement of taxes and dismissal of complainant's appeal;

(C) Any complaint shall be served upon the State Tax Commission personally to any commissioner or to the administrative secretary of the commission, by certified, registered, regular, private carrier service mail or facsimile transmission addressed to the State Tax Commission in Jefferson City.

1. If personal service is made, it may be proven by the affidavit of any person competent to testify, or by the official certificate of any officer authorized under the laws of Missouri to execute process. In determining whether complaints personally served are filed within the time prescribed by law, the date on which personal service is obtained shall be deemed to be the date the complaint is filed with the commission.

2. In determining whether complaints are filed within the time prescribed by law, the complaints may be transmitted to the

commission by registered, certified, or regular mail or by private carrier service. Complaints filed by registered or certified mail shall be deemed filed with the commission as of the date deposited with the United States Postal Service. Complaints filed by private carrier service shall be deemed filed as of the date shown by the record of the mailing. Complaints filed by regular or metered mail shall be deemed filed on the date of post office cancellation; or three (3) days before the date the commission receives the complaints if there is no dated post office cancellation.

3. In determining whether complaints filed by facsimile transmission are filed within the time prescribed by law, complaints so filed shall be deemed filed with the commission as of the date the facsimile transmission is received by the commission. A complaint filed by facsimile transmission shall have the same effect as the filing of an original document and a facsimile signature shall have the same effect as an original signature;

(D) Two (2) copies of the complaint shall be filed with the commission, one (1) copy of which will be forwarded to the assessor with notice of institution of the proceedings to review assessment; and

(E) The State Tax Commission, upon the filing of the complaint, shall set the matter for hearing at the office of the county court at the county seat, or at another place in the county of assessment, as the commission considers convenient, and notice of the hearing shall be given in the manner provided by law.

(2) On any appeal taken to the commission from the local board of equalization, a natural person may represent him/herself in the proceedings before the commission. The county assessor, but not a deputy, may represent his/her office in such proceedings. All others must appear through an attorney licensed to practice law in Missouri or in another jurisdiction.

(A) Any person who signs a pleading or brief, or who enters an appearance at a hearing for an entity or another person, by an act expressly represents that s/he is authorized to so act and that s/he is a licensed attorney-at-law in this state or his/her state of residence.

(B) Any attorney, not licensed in this state but who is a member in good standing of the bar of any court of record, may be permitted to appear and participate in a particular case before the commission under the following conditions: The visiting attorney shall file with his/her initial pleading a statement identifying each court of which s/he is a member of the bar and certifying that neither s/he nor any member of his/her firm is disqualified from appearing in any such court. Also, the statement shall designate some member of the Missouri Bar having an office in Missouri as associate counsel. This designated attorney shall enter his/her appearance as an attorney of record.

(3) When a lawyer is a witness for his/her client, except as to merely formal matters, s/he should leave the trial of the case to other counsel. Except when essential to the ends of justice, a lawyer should avoid testifying before this commission in behalf of his/her client.

(4) The commission shall make arrangements to have all hearings in appeals from the local boards of equalization suitably recorded and preserved.

(5) The fundamental rules of evidence will apply at hearings before the commission.

(6) In computing any period of time prescribed or allowed by these rules, by order of the commission, or by any applicable statute, the day of the act, event, or default after which the designated period of time begins to run is not to be included. The last day of the period so computed is to be included, unless it is a Saturday, Sunday or a legal holiday, in which event the period runs until the end of

the next day which is neither a Saturday, Sunday nor a legal holiday. When the period of time prescribed or allowed is less than seven (7) days, intermediate Saturdays, Sundays and legal holidays shall be excluded in the computation.

(7) When by these rules or by a notice given thereunder or by order of the commission an act is required or allowed to be done at or within a specified time, the commission for cause shown may at any time in its discretion 1) with or without motion or notice order the period enlarged if request is made before the expiration of the period originally prescribed or as extended by previous order or 2) upon notice and motion made after the expiration or the specified period permit the act to be done where the failure to act was the result of excusable neglect; but the commission may not extend the time for taking any action under rules 12 CSR 30-2.021(1)(A); 12 CSR 30-3.021(1)(C); 12 CSR 30-3.005—Appeals of the Assessment of Real Property to the Local Board of Equalization Under the Two-Year Assessed Value Cycle; 12 CSR 30-3.010—Appeals from the Local Board of Equalization; 12 CSR 30-3.020—Intervention; or 12 CSR 30-3.025—Collateral Estoppel.

(8) Any complaint, correspondence, routine motion or application for review shall be accepted for filing by facsimile transmission. Facsimile filings received by the commission before 5:00 p.m. of a regular workday are deemed filed as of that day. Filings received after 5:00 p.m. are deemed filed on the next regular commission workday. Time of receipt is determined by the commission's facsimile machine. The time when transmission began shall be used to determine if transmission occurred prior to 5:00 p.m. If a document is not received by the commission or if it is illegible, it is deemed not filed. Risk of loss in transmission, receipt or illegibility is upon the party transmitting and filing by facsimile transmission.

*AUTHORITY: section 138.430, RSMo 2000. This rule was previously filed as 12 CSR 30-2.030. Original rule filed Dec. 13, 1983, effective March 12, 1984. Amended: Filed April 21, 1988, effective Sept. 11, 1988. Rescinded and readopted: Filed May 14, 1991, effective Oct. 31, 1991. Amended: Filed Aug. 23, 1995, effective Jan. 30, 1996. Rescinded and readopted: Filed June 12, 2002.*

*PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the State Tax Commission of Missouri, Rosemary P. Kaiser, Administrative Secretary, 621 East Capitol Avenue, Jefferson City, MO 65101. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

### **Title 13—DEPARTMENT OF SOCIAL SERVICES Division 40—Division of Family Services Chapter 2—Income Maintenance**

#### **PROPOSED AMENDMENT**

**13 CSR 40-2.140 Limitations on Amount of Cash Payments.**  
The division is amending section (6).

*PURPOSE: This amendment expands the reasons for ineligibility for General Relief when a family meets the definition of a*

*Temporary Assistance household to include families losing Temporary Assistance when they reach their lifetime limits and due to other prohibitions of receipt of Temporary Assistance.*

(6) All persons who meet the definition of *[an AFDC] a Temporary Assistance* household must have their eligibility explored under *[AFDC (except under emergency situations when GR orders may be utilized)] Temporary Assistance* before having their eligibility for GR explored. Any person whose eligibility has been explored under *[AFDC] Temporary Assistance* and is found to be ineligible for *[AFDC cash payments] Temporary Assistance* because of the following reasons shall be ineligible for GR:

(A) The person refuses to cooperate in establishing his/her eligibility for *[AFDC] Temporary Assistance* (this would include persons who refuse to apply for a Social Security number, *[refuse to register for Work Incentive (WIN) program] refuse to participate in work activities*, refuse to make an assignment of support rights, refuse to cooperate in the identification or location of absent parents, *refuse to participate in a self-sufficiency pact or an assessment pursuant to 13 CSR 40-2.370*, and the like);

(D) The available resources exceed the maximum allowed; *[or]*

(E) The children are not deprived of parental support/.;]

(F) The person meets the prohibition in 13 CSR 40-2.305, 13 CSR 40-2.340, 13 CSR 40-2.345, 13 CSR 40-2.355, 13 CSR 40-2.360, or 13 CSR 40-2.365; or

(G) The person is ineligible due to the lifetime limits outlined in 13 CSR 40-2.350.

*AUTHORITY: section 207.020 RSMo [1986] 2000. Filing dates for original rules are shown in the text of the rule. This version filed March 24, 1976. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 20, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Social Services, Division of Family Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Family Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*

### **Title 13—DEPARTMENT OF SOCIAL SERVICES Division 40—Division of Family Services Chapter 2—Income Maintenance**

#### **PROPOSED RULE**

#### **13 CSR 40-2.375 Medical Assistance for Families**

*PURPOSE: This rule establishes the income limit for the Medical Assistance for Families program after June 30, 2002.*

(1) The income limit for persons to be eligible for the Medical Assistance for Families program established pursuant to section 208.145, RSMo is at or below seventy-seven percent (77%) of the federal poverty level for the household size.

(2) The standard work expense for persons with earned income shall be ninety dollars (\$90).

*AUTHORITY: sections 208.145 and 207.020 RSMo 2000. Emergency rule filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. Original rule filed June 11, 2002.*

*PUBLIC COST: This proposed rule will cost the Division of Family Services fourteen thousand eight hundred and seven dollars (\$14,807) in the aggregate.*

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Social Services, Division of Family Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Family Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*

**FISCAL NOTE  
PUBLIC COST**

**RULE NUMBER**

Rule Number and Name: 13 CSR 40-2.375

Type of Rulemaking: Proposed Rule

**II. SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
<b>Division of Family Services</b>	<b>\$14,807</b>

**WORKSHEET**

**21,775 times two equals 43,550 letters times \$0.34 postage per letter equals \$14,807 postage cost.**

**IV. ASSUMPTIONS**

**Approximately 21,775 families will be sent two letters notifying the affected clients. The cost will be \$0.34 cents per letter. Administrative costs are matched by the federal government at 50%. Therefore half, or \$7,403.50 would be general revenue cost and the other half \$7,403.50 would be federal Medicaid cost.**

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 40—Division of Family Services**  
**Chapter 30—Permanency Planning for Children**

**PROPOSED RULE**

**13 CSR 40-30.030 Attorney Fees and Guardian Ad Litem Fees in Subsidized Adoption and Guardianship Cases**

*PURPOSE: This rule establishes fees for attorneys and guardians ad litem who provide services in subsidized adoption and subsidized guardianship cases.*

(1) If permanency for the children requires that children be adopted or placed under a guardianship, the children's prospective adoptive parents/guardians shall be provided representation in such cases which shall include counsel, investigative, expert and other services to ensure adequate representation. Representation shall be provided for any person(s) who has been identified as a prospective adoptive resource for a child who is eligible for the Missouri Adoption Subsidy program. A family is considered to be a prospective adoptive resource when it has been identified as a potential resource for a child via an adoption staffing held by the case manager of the child who is available for adoption. A child is considered eligible for the Missouri Adoption Subsidy program when he or she is or has been in the custody of the Division of Family Services or one (1) of the following agencies: Department of Mental Health, Division of Youth Services or a licensed child-placing agency.

(2) Payment for attorney representation shall be made as provided below.

(A) Hourly Rate. Any attorney shall, at the conclusion of the representation (i.e., the conclusion of trial or at the conclusion of any appeal, or both at the conclusion of the hearing and at the conclusion of appeal), be compensated at a rate not exceeding one hundred dollars (\$100) per hour for time expended in court and seventy-five dollars (\$75) per hour for time reasonably expended out of court, unless the court determines that a higher rate of not in excess of one hundred dollars (\$100) per hour is justified for the area where the services were performed or by reason of the nature of the services performed. Attorneys may be reimbursed for expenses reasonably incurred, including the costs of transcripts authorized by the court.

(B) Maximum Amounts. The compensation to be paid for representation at an adoption hearing shall not exceed one thousand five hundred dollars (\$1,500) for uncontested matters and three thousand dollars (\$3,000) for contested matters. For representation in an appellate court, the compensation shall not exceed two thousand five hundred dollars (\$2,500) at one hundred dollars (\$100) per hour. The compensation to be paid for representation for a guardianship action shall not exceed five hundred dollars (\$500) as budgeted by the state legislature.

(C) Waiving Maximum Amounts. Payment in excess of any maximum amount provided in subsection (2)(B) may be made for extended or complex representation whenever the court in which the representation was rendered certifies that the amount of the excess payment is necessary to provide fair compensation and the payment is approved by the court. At any time an attorney believes that the cost of representation will surpass the limit of three thousand dollars (\$3,000), they must provide written documentation to the Division of Family Services, as to why they do not think that the case will be completed under the current maximum fee.

(D) Disclosure of Fees. The amounts paid to particular attorneys or groups of attorneys shall be available as public records. However, the identity of parties, including parents, children, foster parents and anyone whose confidentiality is established in Chapter 210 or 211, RSMo, shall not be publicly available.

(E) Filing Claims. A separate claim for compensation and reimbursement shall be made to the adoptive parent for each case. Each claim shall be supported by a sworn written statement specifying the time expended, services rendered, and expenses incurred while the case was pending before the court, and the compensation and reimbursement applied for or received in the same case from any other source. The Division of Family Services may agree to the claim, may negotiate the claim with the applying attorney, or may deny the claim in which case the attorney shall apply to the court to determine the compensation and reimbursement to be paid to the attorney.

(F) New Hearings. For purposes of compensation and other payments authorized by this section, an order by a trial or appellate court granting a new trial shall be deemed to initiate a new case.

(3) Payment for Guardian Ad Litem. Children involved in adoption or guardianship cases are entitled to a guardian ad litem. The fees for the guardian ad litem shall be paid in the maximum amount of five hundred dollars (\$500) at seventy-five dollars (\$75) per hour.

*AUTHORITY: section 207.020, RSMo 2000. Emergency rule filed June 13, 2002, effective June 24, 2002, expires Dec. 20, 2002. Original rule filed June 13, 2002.*

*PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed rule will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Division of Family Services, Denise Cross, Director, PO Box 88, Jefferson City, MO 65102. To be considered, comments must be received within thirty (30) days after publication of this notice in the Missouri Register. No public hearing is scheduled.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 4—Conditions of Recipient Participation, Rights and Responsibilities**

**PROPOSED AMENDMENT**

**13 CSR 70-4.090 Uninsured Parents' Health Insurance Program.** The division is amending sections (2), (6), (7), and (8) and deleting sections (3) and (4).

*PURPOSE: This proposed amendment establishes who will be eligible for the Uninsured Parents' Health Insurance Program after June 30, 2002.*

(2) The following uninsured individuals shall be eligible to receive medical services to the extent and in the manner provided in this regulation:

(A) Individuals losing transitional medical assistance (TMA) who would not otherwise be insured or Medicaid eligible, with [gross] net income at or below [three hundred percent (300%)] **one hundred percent (100%)** of the federal poverty level for the household size—

1. Eligibility for the Uninsured Parents' Health Insurance Program for individuals losing TMA ends [twenty-four (24)] **twelve (12)** months after TMA eligibility ends; and

2. After coverage ends, the individuals with a child eligible for MC+ have the option of staying in the MC+ health plan, where managed care is available, if the parents pay the cost of the state's cost for the time period covered by the Missouri Medicaid

Section 1115 Health Care Reform Demonstration Proposal as approved by the Health Care Financing Administration;

*[(B) Uninsured non-custodial parents with income at or below one hundred twenty-five percent (125%) of the federal poverty level for the household size who are current in paying their child support—*

*1. Eligibility for the Uninsured Parents' Health Insurance Program for uninsured non-custodial parents with income below one hundred twenty-five percent (125%) of the federal poverty level ends after twenty-four (24) total months, the months can be non-consecutive; and*

*2. Child support refers to a legally obligated dollar amount established by court or administrative order;*

*(C) Uninsured non-custodial parents who are actively participating in Missouri's Parents' Fair Share Program;*

*(D) Uninsured custodial parents with family income at or below one hundred percent (100%) of the federal poverty level for the household size; and]*

*[(E)] (B) Uninsured women who do not qualify for other medical assistance benefits, and would lose their Medicaid eligibility sixty (60) days after the birth of their child or sixty (60) days after a miscarriage, will continue to be eligible for family planning and limited testing of sexually transmitted diseases (EWH), regardless of income, for [twenty-four (24)] twelve (12) consecutive months [after the pregnancy ends].*

*[(3) Uninsured parents identified in subsections (2)(B), (2)(C) or (2)(D) who had health insurance in the six (6) months prior to the month of application shall not be eligible for coverage under this rule until six (6) months after coverage was dropped.*

*(4) The six (6)-month period of ineligibility would not apply to parents who lose health insurance due to:*

*(A) Loss of employment due to factors other than voluntary termination;*

*(B) Employment with a new employer that does not provide an option for coverage;*

*(C) Expiration of the Consolidated Budget Reconciliation Act (COBRA) coverage period;*

*(D) Lapse of health insurance when the lifetime maximum benefits under their private health insurance have been exhausted; or*

*(E) Lapse of health insurance when maintained by an individual other than the parent, individual losing TMA, or women who qualify for EWH.]*

*[(5)] (3) Beneficiaries covered in section (2) of this rule shall be eligible for service(s) from the date their application is received. No service(s) will be covered prior to the date the application is received.*

*[(6)] (4) The following services are covered for beneficiaries of the Uninsured Parents' Health Insurance Program if they are medically necessary:*

*(A) Inpatient hospital services;*  
*(B) Outpatient hospital services;*  
*(C) Emergency room services;*  
*(D) Ambulatory surgical center, birthing center;*  
*(E) Physician, advanced practice nurse, and certified nurse midwife services;*

*(F) Maternity benefits for inpatient hospital and certified nurse midwife. The health plan shall provide coverage for a minimum of forty-eight (48) hours of inpatient hospital services following a vaginal delivery and a minimum of ninety-six (96) hours of inpatient hospital services following a cesarean section for a mother and her newly born child in a hospital or any other health care facility licensed to provide obstetrical care under the provision of*

Chapter 197, RSMo. A shorter length of hospital stay for services related to maternity and newborn care may be authorized if a shorter inpatient hospital stay meets with the approval of the attending physician after consulting with the mother and is in keeping with federal and state law. The health plan is to provide coverage for post-discharge care to the mother and her newborn. The physician's approval to discharge shall be made in accordance with the most current version of the "Guidelines for Perinatal Care" prepared by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists, or similar guidelines prepared by another nationally recognized medical organization and be documented in the patient's medical record. The first post-discharge visit shall occur within twenty-four (24) to forty-eight (48) hours. Post-discharge care shall consist of a minimum of two (2) visits at least one (1) of which shall be in the home, in accordance with accepted maternal and neonatal physical assessments, by a registered professional nurse with experience in maternal and child health nursing or a physician. The location and schedule of the post-discharge visits shall be determined by the attending physician. Services provided by the registered professional nurse or physician shall include, but not be limited to, physician assessment of the newborn and mother, parent education, assistance and training in breast or bottle feeding, education and services for complete childhood immunizations, the performance of any necessary and appropriate clinical tests and submission of a metabolic specimen satisfactory to the state laboratory. Such services shall be in accordance with the medical criteria outlined in the most current version of the "Guidelines for Perinatal Care" prepared by the American Academy of Pediatrics and the American College of Obstetricians and Gynecologists, or similar guidelines prepared by another nationally recognized medical organization. If the health plan intends to use another nationally recognized medical organization's guidelines, the state agency must approve prior to implementation of its use;

*(G) Family planning services;*

*(H) Pharmacy benefits;*

*(I) Dental services to treat trauma [or disease];*

*(J) Laboratory, radiology and other diagnostic services;*

*(K) Prenatal case management;*

*(L) Hearing aids and related services;*

*(M) Eye exams and services to treat trauma or disease (one (1) pair of glasses after cataract surgery only);*

*(N) Home health services;*

*(O) Emergent (ground or air) transportation;*

*(P) Non-emergent transportation only for members in ME Code 78 Parents' Fair Share;*

*(Q) Mental health and substance abuse services;*

*(R) Services of other providers when referred by the health plan's primary care provider;*

*(S) Hospice services;*

*(T) Durable medical equipment (including but not limited to: orthotic and prosthetic devices, respiratory equipment and oxygen, enteral and parenteral nutrition, wheelchairs and walkers, diabetes supplies and equipment);*

*(U) Diabetes self-management training for persons with gestational, Type I or Type II diabetes;*

*(V) Services provided by local health agencies (may be provided by the health plan or through an arrangement between the local health agency and the health plan)—*

*1. Screening, diagnosis, and treatment of sexually transmitted diseases;*

*2. HIV screening and diagnostic services;*

*3. Screening, diagnosis, and treatment of tuberculosis; and*

*(W) Emergency medical services. Emergency medical services are defined as those health care items and services furnished or required to evaluate or stabilize a sudden and unforeseen situation or occurrence or a sudden onset of a medical or mental health condition manifesting itself by acute symptoms of sufficient severity (including severe pain) that the failure to provide immediate*

medical attention could reasonably be expected by a prudent lay person, possessing average knowledge of health and medicine, to result in:

1. Placing the patient's health (or with respect to a pregnant woman, the health of the woman or her unborn child) in serious jeopardy; or
2. Serious impairment of bodily functions; or
3. Serious dysfunction of any bodily organ or part; or
4. Serious harm to a member or others due to an alcohol or drug abuse emergency; or
5. Injury to self or bodily harm to others; or
6. With respect to a pregnant woman who is having contractions: a) that there is inadequate time to effect a safe transfer to another hospital before delivery; or b) that transfer may pose a threat to the health or safety of the woman or the unborn child.

*[[7]] (5) Individuals losing TMA[, uninsured non-custodial parent(s) with family income at or below one hundred twenty-five percent (125%) of the federal poverty level who are current in paying their child support and uninsured custodial parent(s) with family income at or below one hundred percent (100%) of the federal poverty level] shall owe a ten dollar (\$10) co-payment for certain professional services and a five dollar (\$5) co-payment in addition to the recipient portion of the professional dispensing fee for pharmacy services required by 13 CSR 70-4.051.*

(A) Providers may request payment of the mandatory co-payment(s) prior to or after service delivery.

(B) The co-payment amount shall be deducted from the Medicaid maximum allowable amount for fee-for-service claims reimbursed by the Division of Medical Services.

(C) Service(s) may not be denied for failure to pay the mandatory co-payment(s).

(D) When a mandatory co-payment is not paid, the Medicaid provider will have the following options:

1. Forego the co-payment entirely;
  2. Make arrangements for future payment with the recipient;
- or
3. File a claim with the Division of Medical Services to report the non-payment of the mandatory co-payment(s) and secure payment for the service from the Division of Medical Services.

(E) When the Division of Medical Services receives a claim from a Medicaid fee-for-service provider for non-payment of the mandatory co-payment, the division shall send a notice to the recipient—

1. Requesting that the recipient reimburse the Division of Medical Services for the mandatory co-payment made on their behalf;
2. Requesting information from the recipient to determine if the mandatory co-payment was not made because there has been a change in the financial situation of the family; and
3. Advising the recipient of the possible loss of coverage for up to six (6) months if the recipient fails to pay three (3) co-payments in one (1) year.

(F) The recipient will be allowed fourteen (14) calendar days to respond. If the recipient indicated there has been a change in the financial situation of the family, the state shall redetermine eligibility—

1. If the eligibility redetermination places the recipient in a non-mandatory co-payment category, there will be no co-payment due; or
2. If the eligibility redetermination does not place the recipient in a non-mandatory co-payment category another notice will be sent to the recipient about the mandatory co-payment provision of the program which shall include the number of co-payments that have not been paid and how many may not be paid before a recipient is terminated from the program.

(G) Notice of non-payment of mandatory co-payment(s) sent to the recipient during the course of a year shall establish a pattern of

not meeting the mandatory cost sharing requirement of the program. The process to terminate eligibility shall proceed with the third failure to pay a mandatory co-payment in any one (1) year or until one (1) or more of the three (3) delinquent mandatory co-payments is made. Coverage shall begin again only after payment of one (1) or more of the three (3) co-payments or passage of six (6) months time whichever occurs first. Health care coverage shall not be retroactive.

1. A year starts at the time a co-payment is reported not paid to the Division of Medical Services;

2. Payment of a delinquent co-payment or co-payments will eliminate the failure to pay a mandatory co-payment or co-payments.

(H) Recipient(s) shall have access to a fair hearing process to appeal the disenrollment decision.

(I) If the recipient fails to pay the mandatory co-payments three (3) times within a year and is disenrolled from coverage the recipient shall not be eligible for coverage for six (6) months after the department provides notice to the recipient of disenrollment for failure to pay mandatory co-payments or until one (1) or more of the three (3) delinquent mandatory co-payments is paid. Coverage shall begin again only after payment of one (1) or more of the three (3) co-payments or passage of six (6) months whichever occurs first. Coverage shall not be retroactive.

*[[8]] (6) [Uninsured non-custodial parents who are actively participating in Missouri's Parents' Fair Share Program and u/Uninsured women who do not qualify for other benefits, and would lose their Medicaid eligibility sixty (60) days after the birth of their child or sixty (60) days after a miscarriage are not required to pay a co-payment for services.*

*[[9]] (7) The Department of Social Services, Division of Medical Services shall provide for granting an opportunity for a fair hearing to any applicant or recipient whose claim for benefits under the Missouri Medicaid Section 1115 Health Care Reform Demonstration Proposal is denied or disenrollment for failure to pay mandatory co-payments has been determined by the Division of Medical Services. There are established positions of state hearing officer within the Department of Social Services, Division of Legal Services in order to comply with all pertinent federal and state law and regulations. The state hearing officers shall have authority to conduct state level hearings of an appeal nature and shall serve as direct representative of the director of the Division of [Medicaid] Medical Services.*

*AUTHORITY: sections 208.040, RSMo Supp. 2001, 208.201 and 660.017, RSMo 2000. Emergency rule filed Sept. 13, 1999, effective Sept. 23, 1999, terminated Oct. 15, 1999. Original rule filed Aug. 16, 1999, effective March 30, 2000. Amended: Filed March 29, 2001, effective Oct. 30, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 11, 2002.*

*PUBLIC COST: This proposed amendment will cost state agencies and political subdivisions eight thousand eight hundred fifty-two dollars (\$8,852) in the aggregate.*

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of the Director, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*



**FISCAL NOTE  
PUBLIC COST**

**RULE NUMBER**

Rule Number and Name:	13 CSR 70-4.090 Uninsured Parents' Health Insurance Program
Type of Rulemaking:	Proposed Amendment

**II. SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
<b>Dept of Social Services (DSS)</b>	<b>\$8,852</b>

**WORKSHEET**

**DSS, Division of Medical Services: 1,629 notices sent @ .253 per piece = \$412.14**

**DSS, Division of Family Services: 24,000 notices sent @.34 per piece = \$8,438.48**

**IV. ASSUMPTIONS**

**Non-Custodial Parents/Parents Fair Share – 2 notices to 1,659 cases**

**Extended Women's Health Services – 13,602 cases, 5,330 of these will receive 2 notices**

**Extended Transitional Medical Assistance – 1,720 cases will be notified, 852 will receive 2 notices**

**Administrative cost are matched at a fifty percent (50%) rate.**

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 15—Hospital Program**

**PROPOSED AMENDMENT**

**13 CSR 70-15.040 Inpatient Hospital and Outpatient Hospital Settlements.** The division is amending section (1) and subsections (2)(E), (4)(A), (4)(C)–(E) and adding subsection (4)(F).

*PURPOSE: This amendment amends section (1) and subsections (2)(E), (4)(A), (4)(C)–(E) and adds (4)(F). The proposed changes eliminate final or amended settlements for outpatient hospital services for cost reports ending after December 31, 1998 for hospitals reimbursed under the prospective outpatient methodology authorized in 13 CSR 70-15.160.*

(1) General. This regulation defines the specific procedures used to calculate inpatient and outpatient settlements for Missouri in-state hospitals participating in the Missouri Medicaid program. Although inpatient and outpatient settlements are calculated at the same time, an overpayment for outpatient services shall not be offset against an underpayment for inpatient services. **Outpatient settlements shall not be determined for cost report periods ending after December 31, 1998 except for recently closed hospitals and new hospitals as provided for in subsection (4)(E).**

(2) Definitions.

(E) Outpatient services/cost. Reimbursable outpatient services or costs are services or costs that are provided prior to the patient being admitted to the hospital. Only outpatient services or cost which are reimbursed on a percentage of charge as defined in *[13 CSR 70-15.010/ 13 CSR 70-15.160]* will be included in the final settlement, unless they are excluded elsewhere in this regulation.

(4) Outpatient Hospital Settlements, Provider Based Rural Health Clinic (PBRHC) settlements or Provider Based Federally Qualified Health Centers (PBFQHC) settlements will be calculated after the division receives the Medicare/Medicaid cost report with a NPR from the hospital fiscal intermediary.

(A) The Division of Medical Services shall adjust the hospital's outpatient Medicaid payments, PBRHC or PBFQHC Medicaid payments to conform with the percent of cost paid on an interim basis under *[13 CSR 70-15.010/13 CSR 70-15.160]* for the appropriate time period (except for those hospitals that qualify under subsection (4)(B), whose payments will be based on the percent of cost in paragraph (4)(A)1., 2., or 3.) for—

1. Services prior to January 5, 1994, the lower of eighty percent (80%) of the outpatient share of the costs from subsection (4)(D), or eighty percent (80%) of the outpatient charges from paragraph (4)(C)1.;

2. Services after January 4, 1994 and prior to April 1, 1998, the lower of ninety percent (90%) of the outpatient share of the cost from subsection (4)(D), or ninety percent (90%) of the outpatient charge from paragraph (4)(C)1.;

3. Services after March 31, 1998, **included in cost reports ending prior to January 1, 1999**, the lower of one hundred percent (100%) of the outpatient share of the cost from subsection (4)(D), or one hundred percent (100%) of the outpatient charge from paragraph (4)(C)1.; and

4. PBRHC and PBFQHC shall be reimbursed one hundred percent (100%) of its share of the cost in paragraph (4)(E)2.

(C) The Medicaid charges used to determine the cost, and the payments used to determine the settlement will be—

1. For outpatient services the charges and payments extracted from the Medicaid outpatient claims history for reimbursable services paid on a percentage basis under *[13 CSR 70-15.010/ 13 CSR 70-15.160]*.

2. For PBRHC and PBFQHC the charges and payments will be for services billed under 13 CSR 70-94.020.

(D) The Medicaid hospital's outpatient, cost will be determined by multiplying the overall outpatient cost-to-charge ratio, determined in accordance with paragraph (4)(D)1., by the Medicaid charges from paragraphs (4)(C)1. To this product will be added the Medicaid outpatient share of GME. The GME will be determined using the methodology on worksheet E-3 part IV from the Medicare/Medicaid cost report (HCFA 2552-92) by substituting Medicaid data in place of Medicare data.

1. The overall outpatient cost-to-charge ratio will be determined by multiplying the reported total outpatient charges for each ancillary cost center, excluding PBRHC or PBFQHC, on the supplemental worksheet C column 10 (HCFA 2552-83) or substitute schedule by the appropriate cost-to-charge ratio from worksheet C (HCFA 2552-92) column 7 part I of the fiscal intermediary's audited Medicare/Medicaid cost report to determine the outpatient cost for each cost center reimbursed on a percentage of charge basis by Medicaid under *[13 CSR 70-15.010/ 13 CSR 70-15.160]*. Total the outpatient costs from each cost center and total the outpatient charges from each cost center. Divide the total outpatient costs by the total outpatient charges to arrive at the overall outpatient cost-to-charge ratio.

(E) The Medicaid outpatient final settlement **for cost reports ending prior to January 1, 1999, unless the hospital closed prior to July 1, 2002**, will determine either an overpayment or an underpayment for the hospital's outpatient services *[and PBRHC or PBFQHC]*.

1. The outpatient Medicaid cost determined in subsection (4)(D) is multiplied by the percent of cost allowed in paragraph (4)(A)1., 2., or 3., to determine the reimbursable cost for outpatient services. (If a cost report covers both periods the outpatient Medicaid charges will be split to determine the reimbursable cost for each time period.) From this cost subtract the outpatient payments made on a percentage of charge basis under *[13 CSR 70-15.010/ 13 CSR 70-15.160]* for the time period. (Medicaid payments include the actual payment by Medicaid, third party payments, coinsurance and deductibles.) The difference is either an overpayment (negative amount) due from provider or underpayment (positive amount) due to provider; *[and]*

2. *[For PBRHC or PBFQHC services multiply the PBRHC or PBFQHC Medicaid charges from paragraph (4)(C)2., by the cost center's cost-to-charge ratio to determine PBRHC or PBFQHC cost. From this cost, the PBRHC or PBFQHC payments associated with charges from paragraph (4)(C)2., are subtracted. The difference is either an overpayment (negative amount) due from provider or underpayment (positive amount) due to provider.] Closed facilities. Hospitals which closed after January 1, 1999 but before July 1, 2002 will have final settlements for cost reports ending during this time period calculated in accordance with 13 CSR 70-15.040(4)(E)1.; and*

3. New hospitals which do not have a fourth, fifth, and sixth prior year cost report necessary for establishment of a prospective rate will have final settlement calculated for their initial three (3) cost report periods.

(F) The Medicaid PBRHC or PBFQHC final settlement will determine either an overpayment or an underpayment for the hospital's PBRHC or PBFQHC services. For PBRHC or PBFQHC services multiply the PBRHC or PBFQHC Medicaid charges from paragraph (4)(C)2., by the cost center's cost-to-charge ratio to determine PBRHC or PBFQHC cost. From this cost, the PBRHC or PBFQHC payments associated with charges from paragraph (4)(C)2., are subtracted. The difference is either an overpayment (negative amount) due from provider or an underpayment (positive amount) due to provider.

*AUTHORITY: sections 208.152, 208.153, 208.201, RSMo 2000 and 208.471, RSMo Supp. 2001. Original rule filed June 2, 1994, effective Dec. 30, 1994. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003. Amended: Filed June 14, 2002.*

*PUBLIC COST: This proposed amendment is expected to cost state agencies or political subdivisions \$17,659,856 in the aggregate in SFY 2003. This fiscal impact is because the division will not calculate final settlements on hospital's 1999 cost report.*

*PRIVATE COST: This proposed amendment is not expected to cost private entities more than five hundred dollars (\$500) in the aggregate in SFY 2003.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Department of Social Services, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*

**FISCAL NOTE  
PUBLIC COST****RULE NUMBER**

Rule Number and Name:	13 CSR 70-15.040 Inpatient Hospital and Outpatient Hospital Settlements
Type of Rulemaking:	Proposed Amendment

**II. SUMMARY OF FISCAL IMPACT**

Affected Agency or Political Subdivision	Estimated Cost of Compliance in the Aggregate
Department of Social Services Division of Medical Services	\$17,659,856

**WORKSHEET**

The worksheets calculate the estimated final settlements on hospitals 1999 cost reports. The worksheet reports an overpayment to hospitals in the amount of \$17,659,856. Prior to this change, this amount would have been either repaid by the hospital or offset from current Medicaid payments.

**IV. ASSUMPTIONS**

The assumptions are the final settlements for hospitals 1999 cost reports would result in an overpayment to hospitals in the amount of \$17,659,856 to hospitals which would have been repaid by the hospital either by check or through recoupment from current payment prior to this amendment. However, the Division has also submitted a new proposed rule (13 CSR 70-15.160) which establishes an outpatient prospective payment methodology. Under this proposed rule, the hospitals' interim outpatient payments would be reduced by \$13,781,196 for the current year and each subsequent year, resulting in a net cost to the state of \$3,878,660 for the first year only. Subsequent-year reductions in payments to hospitals will reduce state costs for outpatient services to Medicaid beneficiaries by a comparable amount. The net effect of a more accurate computation of a prospective payment ratio over time will result in a budget neutral impact of this proposed amendment to the state and hospitals.

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 15—Hospital Program**

**PROPOSED RULE**

**13 CSR 70-15.160 Prospective Outpatient Hospital Services Reimbursement Methodology**

*PURPOSE: This rule establishes a prospective outpatient reimbursement methodology for hospitals in place of the current retrospective reimbursement methodology. This rule establishes the methodology for setting a hospital's prospective outpatient payment percentage for hospital services effective July 1, 2002.*

*PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. Therefore, the material which is so incorporated is on file with the agency who filed this rule, and with the Office of the Secretary of State. Any interested person may view this material at either agency's headquarters or the same will be made available at the Office of the Secretary of State at a cost not to exceed actual cost of copy reproduction. The entire text of the rule is printed here. This note refers only to the incorporated by reference material.*

**(1) Prospective Outpatient Hospital Services Reimbursement Percentage for Hospitals Located Within Missouri.**

(A) Outpatient hospital services shall be reimbursed on a prospective outpatient payment percentage effective July 1, 2002 except for services identified in subsection (1)(C). The prospective outpatient payment percentage will be calculated using the Medicaid over-all outpatient cost-to-charge ratio from the fourth, fifth, and sixth prior base year cost reports regressed to the current State Fiscal Year (SFY). (If the current SFY is 2003 the fourth, fifth and sixth prior year cost reports would be the cost report filed in calendar year 1997, 1998 and 1999.) The prospective outpatient payment percentage shall not exceed one hundred percent (100%) except for nominal charge providers and shall not be less than twenty percent (20%).

(B) Outpatient cost-to-charge ratios will be as determined in the desk review of the base year cost reports.

(C) Outpatient hospital services reimbursement limited by rule.

1. All services provided to General Relief (GR) recipients will be reimbursed from the Medicaid fee schedule in accordance with provisions of 13 CSR 70-2.020.

2. Effective for dates of service September 1, 1985, and annually updated, certain clinical diagnostic laboratory procedures will be reimbursed from a Medicaid fee schedule which shall not exceed a national fee limitation.

3. Services of hospital-based physicians and certified registered nurse anesthetists shall be billed on an HCFA-1500 professional claim form which is incorporated by reference as part of this rule, and reimbursed from a Medicaid fee schedule or the billed charge, if less.

4. Outpatient hospital services provided for those recipients having available Medicare benefits shall be reimbursed by Medicaid to the extent of the deductible and coinsurance as imposed under Title XVIII.

(2) Exempt Hospitals. Medicaid providers which do not have a fourth, fifth and sixth prior year cost report.

(A) Interim Payment Percentage. An interim outpatient payment percentage for new Medicaid hospital providers will be set at seventy-five percent (75%) for the first three (3) state fiscal years in which the hospital operates. The cost reports for these three (3)

years will have a cost settlement calculated in accordance with 13 CSR 70-15.040.

(B) Outpatient Percentage. The outpatient payment percentage for the fourth and fifth year in which the hospital operates will be based on the overall Medicaid cost-to-charge ratio from its fourth prior year cost report.

(3) Closed Facilities. Hospitals which closed after January 1, 1999 but before July 1, 2002 will have final settlements for cost reports ending during this time period calculated in accordance with 13 CSR 70-15.040.

(4) Definitions.

(A) Base cost report. Desk-reviewed Medicare/Medicaid cost report. When a facility has more than one (1) cost report with periods ending in the fourth prior calendar year, the cost report covering a full twelve (12)-month period will be used. If none of the cost reports covers a full twelve (12) months, the cost report with the latest period will be used. If a hospital's base cost report is less than or greater than a twelve (12)-month period, the data shall be adjusted, based on the number of months reflected in the base cost report to a twelve (12)-month period.

(B) Cost report. A cost report details, for purposes of both Medicare and Medicaid reimbursement, the cost of rendering covered services for the fiscal reporting period. The Medicare/Medicaid Uniform Cost Report contains the forms utilized in filing the cost report.

(C) Effective date.

1. The plan effective date shall be July 1, 2002.

2. New prospective outpatient payment percentages will be effective July 1 of each SFY.

(5) Out-of-State Outpatient Reimbursement.

(A) Out-of-state outpatient hospital services and services of federally-operated hospitals located within Missouri will be reimbursed by Missouri Medicaid at sixty percent (60%) of usual and customary charges as billed by the provider for covered services with the exceptions for services in subsection (1)(C).

*AUTHORITY: sections 208.152, 208.153, 208.201, RSMo and 208.471, RSMo Supp. 2001. Emergency rule filed June 20, 2002, effective July 1, 2002, expires Feb. 27, 2003. Original rule filed June 14, 2002.*

*PUBLIC COST: This proposed rule will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate in SFY 2003.*

*PRIVATE COST: This proposed rule will cost private entities \$13,781,196 in the aggregate in SFY 2003. It is anticipated these payments would have been recouped as outpatient overpayments under the current retrospective reimbursement methodology in future years.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed rule with the Department of Social Services, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*

# **FISCAL NOTE PRIVATE COST**

## **RULE NUMBER**

Rule Number and Name:	13 CSR 70-15.160 Prospective Outpatient Hospital Services Reimbursement Methodology
Type of Rulemaking:	Proposed Rule

## **II. SUMMARY OF FISCAL IMPACT**

Estimate of the number of entities by class which would likely be	Classification by types of the business entities which would likely be	Estimate in the aggregate as to the cost of compliance with the rule by
135 Hospitals	Hospital	\$13,781,196

## **WORKSHEET**

The worksheet provided the reduction in claim payment of \$13,781,961 for outpatient hospital services using a prospective payment system with a minimum payment percentage after the regression of 20%.

## **ASSUMPTIONS**

The assumption used to arrive at the fiscal impact on private entities are as follows:

Hospitals prospective outpatient payment percentages were determined using a regression of the 1997, 1998 and 1999 cost-to-charge ratio to arrive at the SFY 2003 prospective outpatient payment percentage. This percentage was limited to a floor of 20%.

The reduction in the hospitals outpatient payment percent using the regression analysis with 20% floor results in hospitals payment dropping \$13,781,196.

While this proposed rule shows an impact of \$13,781,196 on hospitals, the net impact of this new proposed rule and the changes to 13 CSR 70-15.040 on hospitals would be a gain \$3,878,660 in SFY 2003 as the Division would have completed final settlements for \$17,654,836 which the hospital would have repaid in SFY 1999 in accordance with 13 CSR 70-15.040.

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 20—Pharmacy Program**

**PROPOSED AMENDMENT**

**13 CSR 70-20.031 List of Excludable Drugs for Which Prior Authorization is Required.** The division is amending section (3).

*PURPOSE: This amendment establishes a more timely notification to providers regarding products requiring Prior Authorization in order for them to be reimbursable under the Missouri Medicaid Pharmacy Program.*

(3) List of drugs or categories of excludable drugs which are restricted to require prior authorization for certain specified indications/—/ **shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.**

<i>Drug or Category of Drug</i>	<i>Allowed Indications</i>
<i>Amphetamines</i>	<i>Attention Deficit Hyperactivity Disorder Narcolepsy</i>
<i>Barbiturates (with the exception of phenobarbital and mephobarbital and methabarbital which do not require prior authorization)</i>	<i>All medically accepted uses</i>
<i>Isotretinoin</i>	<i>Noncosmetic uses</i>
<i>Orlistat</i>	<i>Dyslipidemia</i>
<i>Retinoic Acid, topical</i>	<i>Noncosmetic uses</i>

*AUTHORITY: sections 208.153 and 208.201, RSMo [1994] 2000. Original rule filed Dec. 13, 1991, effective Aug. 6, 1992. For intervening history, please consult the Code of State Regulations. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 11, 2002.*

*PUBLIC COST: This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.*

*PRIVATE COST: This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.*

*NOTICE TO SUBMIT COMMENTS: Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of the Director, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the Missouri Register. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.*

**Title 13—DEPARTMENT OF SOCIAL SERVICES  
Division 70—Division of Medical Services  
Chapter 20—Pharmacy Program**

**PROPOSED AMENDMENT**

**13 CSR 70-20.032 List of Drugs Excluded From Coverage Under the Missouri Medicaid Pharmacy Program.** The division is amending section (2).

*PURPOSE: This amendment establishes a more timely notification to providers regarding products for which reimbursement is not available through the Missouri Medicaid Pharmacy Program.*

(2) List of drugs or classes which are excluded from reimbursement through the Missouri Medicaid Pharmacy Program /—/ **shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.**

<i>Drug or Category</i>	<i>Exceptions— Reimbursable</i>
<i>Drugs used to promote fertility</i>	
<i>Drugs used to promote weight loss</i>	
<i>Drugs used to promote hair growth</i>	
<i>Drugs used for cosmetic purposes</i>	
<i>Nonlegend vitamins, multivitamins and minerals, adult</i>	<i>Children's Chewable Multi-vitamins</i>
	<i>Calcium Preparations</i>
	<i>Iron Preparations</i>
<i>Drugs used to promote smoking cessation</i>	
<i>Nonlegend lotions, shampoos and medicated soaps</i>	
<i>Nonlegend acne preparations</i>	
<i>Nonlegend weight control products</i>	
<i>Nonlegend ophthalmic products</i>	<i>Artificial tear products</i>
	<i>Eyewash products</i>
	<i>Ocular lubricants</i>
<i>Contact lens products</i>	
<i>Nonlegend oral analgesics</i>	<i>All nonlegend strengths and dosage forms of: Acetaminophen Aspirin Buffered aspirin Ibuprofen Naproxensodium</i>
<i>Nonlegend stimulant products</i>	
<i>Nonlegend external analgesic products</i>	

<i>Drug or Category</i>	<i>Exceptions— Reimbursable</i>
<i>Nonlegend hemorrhoidal products</i>	
<i>Halazepam</i>	
<i>Prazepam</i>	
<i>Estazolam</i>	
<i>Quazepam</i>	

*AUTHORITY: sections 208.153 and 208.201, RSMo [1994] 2000. Original rule filed Dec. 13, 1991, effective Aug. 6, 1992. Amended: Filed June 30, 2000, effective Feb. 28, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 11, 2002.*

**PUBLIC COST:** This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

**PRIVATE COST:** This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

**NOTICE TO SUBMIT COMMENTS:** Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of the Director, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the *Missouri Register*. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.

**Title 13—DEPARTMENT OF SOCIAL SERVICES**  
**Division 70—Division of Medical Services**  
**Chapter 20—Pharmacy Program**

**PROPOSED AMENDMENT**

**13 CSR 70-20.034 List of Non-Excludable Drugs for Which Prior Authorization Is Required.** The division is amending section (2).

**PURPOSE:** This amendment establishes a more timely notification to providers regarding products requiring prior authorization in order for them to be reimbursable under the Missouri Medicaid Pharmacy Program.

(2) List of drugs or categories of drugs which are restricted to require prior authorization for certain specified indications [—] shall be made available through the Department of Social Services, Division of Medical Services website at [www.dss.state.mo.us/dms](http://www.dss.state.mo.us/dms), provider bulletins, and updates to the provider manual.

<i>[Drug or Category of Drug]</i>	<i>Allowed Indications</i>
Abortifacients	Termination of pregnancy resulting from an act of rape or incest or when necessary to protect the life of the mother
Butorphanol, nasal spray	Override of quantity restriction allowed for medically accepted uses
Drugs used to treat sexual dysfunction	Sexual dysfunction
Histamine 2 Receptor Antagonists	Medically accepted uses
Ketorolac, oral	Short-term treatment of moderately severe acute pain following injection of same entity
Linezolid, oral	Medically accepted uses
Modafanil	Narcolepsy
Proton Pump Inhibitors	Medically accepted uses

**AUTHORITY:** sections 208.152, 208.153 and 208.201, RSMo [1994] 2000. Emergency rule filed Nov. 21, 2000, effective Dec. 1, 2000, expired May 29, 2001. Original rule filed June 29, 2000, effective Feb. 28, 2001. Emergency amendment filed June 7, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 11, 2002.

**PUBLIC COST:** This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

**PRIVATE COST:** This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

**NOTICE TO SUBMIT COMMENTS:** Anyone may file a statement in support of or in opposition to this proposed amendment with the Office of the Director, Division of Medical Services, 615 Howerton Court, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication in the *Missouri Register*. If to be hand-delivered, comments must be brought to the Division of Medical Services at 615 Howerton Court, Jefferson City, Missouri. No public hearing is scheduled.

**Title 19—DEPARTMENT OF HEALTH AND SENIOR SERVICES**  
**Division 20—Division of Environmental Health and Communicable Disease Prevention**  
**Chapter 20—Communicable Diseases**

**PROPOSED AMENDMENT**

**19 CSR 20-20.040 Measures for the Control of Communicable, Environmental and Occupational Diseases.** This proposed amendment deletes section (6).

**PURPOSE:** This amendment is to remove the sunset clause on this rule in order to continue to define investigative and control measures for communicable, environmental, and occupational diseases.

*[(6) This rule will expire on June 30, 2002.]*

**AUTHORITY:** sections 192.006[.1] and 192.020, RSMo [1994] 2000. This rule was previously filed as 13 CSR 50-101.050. Original rule filed July 15, 1948, effective Sept. 13, 1948. Rescinded and readopted: Filed Dec. 11, 1981, effective May 13, 1982. Amended: Filed Sept. 16, 1982, effective Jan. 14, 1983. Amended: Filed March 21, 1984, effective July 15, 1984. Amended: Filed June 2, 1988, effective Aug. 25, 1988. Amended: Filed Nov. 15, 1989, effective Feb. 11, 1990. Amended: Filed Aug. 14, 1992, effective April 8, 1993. Amended: Filed Sept. 15, 1995, effective April 30, 1996. Emergency amendment filed June 13, 2002, effective July 1, 2002, expires Dec. 27, 2002. Amended: Filed June 13, 2002.

**PUBLIC COST:** This proposed amendment will not cost state agencies or political subdivisions more than five hundred dollars (\$500) in the aggregate.

**PRIVATE COST:** This proposed amendment will not cost private entities more than five hundred dollars (\$500) in the aggregate.

**NOTICE TO SUBMIT COMMENTS:** Anyone may file a statement in support of or in opposition to this proposed amendment with Pam Walker, Division Director, Division of Environmental Health and Communicable Disease Prevention, 930 Wildwood, Jefferson City, MO 65109. To be considered, comments must be received within thirty (30) days after publication of this notice in the *Missouri Register*. No public hearing is scheduled.



**T**his section will contain the final text of the rules proposed by agencies. The order of rulemaking is required to contain a citation to the legal authority upon which the order of rulemaking is based; reference to the date and page or pages where the notice of proposed rulemaking was published in the *Missouri Register*; an explanation of any change between the text of the rule as contained in the notice of proposed rulemaking and the text of the rule as finally adopted, together with the reason for any such change; and the full text of any section or subsection of the rule as adopted which has been changed from that contained in the notice of proposed rulemaking. The effective date of the rule shall be not less than thirty (30) days after the date of publication of the revision to the *Code of State Regulations*.

**T**he agency is also required to make a brief summary of the general nature and extent of comments submitted in support of or opposition to the proposed rule and a concise summary of the testimony presented at the hearing, if any, held in connection with the rulemaking, together with a concise summary of the agency's findings with respect to the merits of any such testimony or comments which are opposed in whole or in part to the proposed rule. The ninety (90)-day period during which an agency shall file its Order of Rulemaking for publication in the *Missouri Register* begins either: 1) after the hearing on the Proposed Rulemaking is held; or 2) at the end of the time for submission of comments to the agency. During this period, the agency shall file with the secretary of state the order of rulemaking, either putting the proposed rule into effect, with or without further changes, or withdrawing the proposed rule.

## Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

### Division 110—Missouri Dental Board Chapter 2—General Rules

#### ORDER OF RULEMAKING

By the authority vested in the Missouri Dental Board under section 332.311.2, RSMo Supp. 2001, the board adopts a rule as follows:

#### **4 CSR 110-2.131** Definition of a Public Health Setting is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2002 (27 MoReg 554-555). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## Title 4—DEPARTMENT OF ECONOMIC DEVELOPMENT

### Division 110—Missouri Dental Board Chapter 2—General Rules

#### ORDER OF RULEMAKING

By the authority vested in the Missouri Dental Board under section 332.311.2, RSMo Supp. 2001, the board adopts a rule as follows:

#### **4 CSR 110-2.132** Dental Hygienists—Equipment Requirements for Public Health Settings is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2002 (27 MoReg 555). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## Title 7—DEPARTMENT OF TRANSPORTATION Division 10—Missouri Highways and Transportation Commission

### Chapter 14—Adopt-A-Highway Program

#### ORDER OF RULEMAKING

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130 and 227.030, RSMo 2000, the commission amends a rule as follows:

#### **7 CSR 10-14.020** Definitions is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 312). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

## Title 7—DEPARTMENT OF TRANSPORTATION Division 10—Missouri Highways and Transportation Commission

### Chapter 14—Adopt-A-Highway Program

#### ORDER OF RULEMAKING

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130 and 227.030, RSMo 2000, the commission amends a rule as follows:

#### **7 CSR 10-14.030** Application for Participation is amended.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 312-313). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 7—DEPARTMENT OF TRANSPORTATION  
Division 10—Missouri Highways and Transportation  
Commission  
Chapter 14—Adopt-A-Highway Program**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130 and 227.030, RSMo 2000, the commission amends a rule as follows:

**7 CSR 10-14.040** Agreement; Responsibilities of Adopter and Commission is **amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 313-314). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 7—DEPARTMENT OF TRANSPORTATION  
Division 10—Missouri Highways and Transportation  
Commission  
Chapter 14—Adopt-A-Highway Program**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130 and 227.030, RSMo 2000, the commission amends a rule as follows:

**7 CSR 10-14.050** Sign is **amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 314). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 7—DEPARTMENT OF TRANSPORTATION  
Division 10—Missouri Highways and Transportation  
Commission  
Chapter 14—Adopt-A-Highway Program**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Highways and Transportation Commission under sections 226.130 and 227.030, RSMo 2000, the commission amends a rule as follows:

**7 CSR 10-14.060** Modification or Termination of the Agreement is **amended**.

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 314-315). No changes have been made to the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 9—DEPARTMENT OF MENTAL HEALTH  
Division 45—Division of Mental Retardation and  
Developmental Disabilities  
Chapter 5—Standards**

**ORDER OF RULEMAKING**

By the authority vested in the director of the Department of Mental Health under sections 630.050 and 630.655, RSMo Supp. 2001, the director adopts a rule as follows:

**9 CSR 45-5.060** is adopted.

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on March 1, 2002 (27 MoReg 399-402). Those sections with changes are reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The department received five (5) comments on the proposed rule.

COMMENT: One person commenting on subsection (3)(B) stated that two of the agencies referenced in this subsection have changed their names, namely The Commission on Accreditation of Rehabilitation Facilities has changed its name to the Rehabilitation Accreditation Commission, and the Council on Quality and Leadership in Supports for People with Disabilities has changed its name to the Council on Quality and Leadership.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and has revised the subsection accordingly.

COMMENT: One person commenting on paragraph (4)(E)1. objected to the regulation under which a surveyor will cite as a violation a single instance of failure to comply with the standard. The commenter suggested that only patterns of noncompliance should be cited.

RESPONSE: The department considers these standards minimal and essential to health, care, and safety of consumers and thinks that single violations should be cited. Therefore, the department has not revised the regulation as requested.

COMMENT: One person commenting on section (5) questioned the need for the numerous references regarding activities that the department is required to make since a rule primarily regulates entities outside the department.

RESPONSE: The department has not removed the references as requested because references to the department activities are appropriately addressed in an administrative rule when they describe interaction between the department and providers.

COMMENT: Two persons commenting on section (6) stated that oral complaints should be subject to investigation as well as written complaints.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees that the wording is misleading and has revised the section accordingly.

COMMENT: One person commenting on subsection (12)(A) indicated that the word "neglect" has been omitted from the list of items that maybe subject to investigation.

RESPONSE AND EXPLANATION OF CHANGE: The department agrees and has revised the rule accordingly.

**9 CSR 45-5.060 Procedures to Obtain Certification**

(3) The department shall conduct a site survey at an organization to assure compliance with certification standards, standards of care and other requirements.

(B) The department recognizes and deems as certified a provider that has attained full accreditation under standards for Community Services (community living services for Individualized Supported Living (ISL) and residential habilitation and personal and social services for day habilitation) and for Employment Services (supported employment) from the Rehabilitation Accreditation Commission (CARF) or The Council on Quality and Leadership (The Council). The deemed provider must—

1. Submit to the department a copy of the most recent accreditation survey report and verification of the accreditation time period and dates within thirty (30) days of receipt from the accreditation agency.

2. Notify the department when accreditation surveys are scheduled or when accreditation agency makes complaint investigation visit.

3. Notify the department of any changes in accreditation status during the time period of accreditation and resurvey.

4. Identify the department as a primary stakeholder for contact by the accrediting agency during survey and resurvey data gathering processes.

(6) The department may investigate any complaint regarding the operation of a certified or deemed certified program or service. If conditions are found that are not in compliance with applicable certification standards, the department may, at its sole discretion, notify the accrediting organization of any concerns.

(12) The department shall have authority to impose administrative sanctions.

(A) The department may suspend the certification process pending completion of an investigation when an organization that has applied for certification or the staff of that organization is under investigation for fraud, financial abuse, abuse or neglect of persons served, revocation of persons' rights without due process, or improper clinical practices.

## Title 10—DEPARTMENT OF NATURAL RESOURCES

### Division 10—Air Conservation Commission

#### Chapter 6—Air Quality Standards, Definitions, Sampling and Reference Methods and Air Pollution Control Regulations for the Entire State of Missouri

### ORDER OF RULEMAKING

By the authority vested in the Missouri Air Conservation Commission under section 643.050, RSMo 2000, the commission amends a rule as follows:

#### **10 CSR 10-6.110 Submission of Emission Data, Emission Fees and Process Information is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on February 15, 2002 (27 MoReg 318-324). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

**SUMMARY OF COMMENTS:** The Missouri Department of Natural Resources' Air Pollution Control Program received comments on the proposed rule amendment from three sources: Associated Industries of Missouri (AIM), Regulatory Environmental Group for Missouri (REGFORM), and the St. Louis Regional Chamber and Growth Association (RCGA).

**COMMENT:** RCGA stated their support for the proposed emission fee increase in recognition of the importance to the state and

business community that the state maintain an effective air program.

**RESPONSE:** The department's Air Pollution Control Program appreciates RCGA's support for the emission fee increase. No changes were made to the proposed amendment text as a result of this comment.

**COMMENT:** AIM and REGFORM commented that they did not oppose the proposed fee increase.

**RESPONSE:** The department's Air Pollution Control Program understands AIM's and REGFORM's positions relative to the proposed fee increase and appreciates their statement of nonopposition. No changes were made to the proposed amendment text as a result of this comment.

**COMMENT:** AIM commented that the department's Air Pollution Control Program should consider the efficiencies that could be introduced in the expenditure of the funds generated by the fees.

**RESPONSE:** The department's Air Pollution Control Program is currently in the process of determining and implementing further efficiencies into the program's operation. The Missouri Results Initiative is an example of successful government/industry cooperation to review processes and recommend efficiency improvements. No changes were made to the proposed amendment text as a result of this comment.

**COMMENT:** AIM stated their concern with the costs incurred by industry in completing required regulatory forms, for example, the Environmental Inventory Questionnaire (EIQ).

**RESPONSE:** The department's Air Pollution Control Program is cognizant of the regulatory requirements that industry must comply with. Costs were presented as provided by industry.

The program is continuing to work with industry to identify areas of improvement for streamlining operations, including EIQ reporting and compliance certification procedures. As an example, the program believes the Missouri Emission Inventory System (MoEIS) should reduce industry's cost in complying with regulatory requirements.

In 2002, the MoEIS on-line Internet portion of MoEIS is expected to be available for Missouri sources of air pollution to enter their emissions for calendar 2002 using the Internet. No changes were made to the proposed amendment text as a result of this comment.

**COMMENT:** RCGA commented that they are concerned the state is collecting and processing more detailed information on air emissions than is necessary for program operations. In addition, RCGA believes that the state can and should learn from the experiences of neighboring states regarding how the state can gather and process the required emission information without imposing unnecessary burdens and complexities on the regulated community especially on the smaller sources.

**RESPONSE:** The department's Air Pollution Control Program is continuing to work with industry to identify areas of improvement for streamlining operations, including EIQ reporting and compliance certification procedures. No changes were made to the proposed amendment text as a result of this comment.

**COMMENT:** REGFORM commented that the proposed rule amendment includes a temporary one dollar (\$1) add-on that the department's Air Pollution Control Program has pledged to use for the development of MoEIS. REGFORM requests that the commission note this add-on and the department's Air Pollution Control Program's pledge to remove it within two (2) years.

**RESPONSE:** The department's Air Pollution Control Program acknowledges that the one dollar (\$1) fee is a temporary add-on for the continued development of MoEIS. The one dollar (\$1) add-on to the fee for MoEIS is being proposed for emissions during

calendar year 2002 only and will be used in conjunction with other funds to be obtained by the program to further develop MoEIS. By state statute, the emission fees are set annually to fund the reasonable cost of administering the program. No changes were made to the proposed amendment text as a result of this comment.

**Title 11—DEPARTMENT OF PUBLIC SAFETY  
Division 30—Office of the Director  
Chapter 7—Driver and Vehicle Equipment Regulations**

**ORDER OF RULEMAKING**

By the authority vested in the director of the Department of Public Safety under section 307.173, RSMo Supp. 2002, the director hereby adopts a rule as follows:

**11 CSR 30-7.010 Motor Vehicle Window Tinting Permits is adopted.**

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2002 (27 MoReg 565). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 18—PUBLIC DEFENDER COMMISSION  
Division 10—Office of State Public Defender  
Chapter 1—Organization of Agency**

**ORDER OF RULEMAKING**

By the authority vested in the Public Defender Commission under section 600.017(10), RSMo 2000, the commission amends a rule as follows:

**18 CSR 10-1.010 Organization of the Agency is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on March 15, 2002 (27 MoReg 476-477). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 18—PUBLIC DEFENDER COMMISSION  
Division 10—Office of State Public Defender  
Chapter 2—Definition of Eligible Cases**

**ORDER OF RULEMAKING**

By the authority vested in the Public Defender Commission under section 600.017(10), RSMo 2000, the commission amends a rule as follows:

**18 CSR 10-2.010 Definition of Eligible Cases is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on March 15, 2002 (27 MoReg 477). No changes have been made in the text of the proposed amendment, so it is not reprinted here.

This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 18—PUBLIC DEFENDER COMMISSION  
Division 10—Office of State Public Defender  
Chapter 3—Guidelines for the Determination of Indigency**

**ORDER OF RULEMAKING**

By the authority vested in the Public Defender Commission under section 600.017(10), RSMo 2000, the commission amends a rule as follows:

**18 CSR 10-3.010 Guidelines for the Determination of Indigency is amended.**

A notice of proposed rulemaking containing the text of the proposed amendment was published in the *Missouri Register* on March 15, 2002 (27 MoReg 477-478). No changes have been made in the text of the proposed amendment, so it is not reprinted here. This proposed amendment becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 19—DEPARTMENT OF HEALTH  
AND SENIOR SERVICES  
Division 10—Office of the Director  
Chapter 4—Coordinated Health Care Services**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Department of Health and Senior Services under section 191.411, RSMo Supp. 2001, the director rescinds a rule as follows:

**19 CSR 10-4.010 Primary Care Resource Initiative for Missouri (PRIMO) Program is rescinded.**

A notice of proposed rulemaking containing the proposed rescission was published in the *Missouri Register* on March 15, 2002 (27 MoReg 478). No changes have been made to the proposed rescission, so it is not reprinted here. This proposed rescission becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 19—DEPARTMENT OF HEALTH  
AND SENIOR SERVICES  
Division 10—Office of the Director  
Chapter 4—Coordinated Health Care Services**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Department of Health and Senior Services under section 191.411, RSMo Supp. 2001, the director adopts a rule as follows:

**19 CSR 10-4.010 Primary Care Resource Initiative for Missouri (PRIMO) Program is adopted.**

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on March 15, 2002 (27 MoReg 478-481). No changes have been made to the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: No comments were received.

**Title 19—DEPARTMENT OF HEALTH  
AND SENIOR SERVICES  
Division 10—Office of the Director  
Chapter 4—Coordinated Health Care Services**

**ORDER OF RULEMAKING**

By the authority vested in the Missouri Department of Health and Senior Services under section 332.311, RSMo Supp. 2001, the director adopts a rule as follows:

**19 CSR 10-4.040 Definition of a Public Health Setting  
is adopted.**

A notice of proposed rulemaking containing the text of the proposed rule was published in the *Missouri Register* on April 1, 2002 (27 MoReg 571). No changes have been made in the text of the proposed rule, so it is not reprinted here. This proposed rule becomes effective thirty (30) days after publication in the *Code of State Regulations*.

SUMMARY OF COMMENTS: The Department of Health received two comments on the proposed rule.

COMMENT: The Citizens for Missouri's Children and a pediatric medical social worker commented that schools, Head Start, Early Head Start, and WIC facilities should be included in the definition of public health setting in order to increase access to dental services for children.

RESPONSE: For clarification, the proposed rule allows for dental services authorized by section 332.311, RSMo, to be performed at locations such as schools, Head Start, Early Head Start and WIC facilities so long as the delivery of services is sponsored by one of the enumerated governmental entities. As a result, no change is necessary to the rule.

**T**his section may contain notice of hearings, correction notices, public information notices, rule action notices, statements of actual costs and other items required to be published in the *Missouri Register* by law.

**Title 4—DEPARTMENT OF ECONOMIC  
DEVELOPMENT****Division 100—Division of Credit Unions****APPLICATIONS FOR NEW GROUPS  
OR GEOGRAPHIC AREAS**

Pursuant to section 370.081(4), RSMo 2000, the director of the Missouri Division of Credit Unions is required to cause notice to be published that the following credit unions have submitted applications to add new groups or geographic areas to their membership.

Credit Union	Proposed New Group or Geographic Area
Edison Credit Union 4200 E. Front Street Kansas City, MO 64120	Active or retired employees of: ACME Signs, Arrowhead Containers, Building Materials Distributors, Columbia Glass and Window Co., Cook Composites and Polymers, Factory Motor Parts, Foley Company, Gallo Fresh Produce, Harvesters Community Food Networks, Highway Trailer Sales, Kansas City Auto Auction, KCI Incorporated, L'il Guys Foods, Midwest Terminal, Midwest Wholesale Hardware, Nakano Foods, Ticket Master of Kansas City, Western Forms, Inc., immediate family members and households of members.

*NOTICE TO SUBMIT COMMENTS: Anyone may file a written statement in support of or in opposition to any of these applications. Comments shall be filed with: Director, Division of Credit Unions, PO Box 1607, Jefferson City, MO 65102. To be considered, written comments must be submitted no later than ten (10) business days after publication of this notice in the Missouri Register.*

**Title 4—DEPARTMENT OF ECONOMIC  
DEVELOPMENT****Division 100—Division of Credit Unions****ACTIONS TAKEN ON APPLICATIONS FOR NEW  
GROUPS OR GEOGRAPHIC AREAS**

Pursuant to section 370.081(4), RSMo 2000, the director of the Missouri Division of Credit Unions is required to cause notice to be published that the director has either granted or rejected applications from the following credit unions to add new groups or geographic areas to their membership and state the reasons for taking these actions.

The following applications have been granted. These credit unions have met the criteria applied to determine if additional groups may be included in the membership of an existing credit union and have the immediate ability to serve the proposed new groups or geographic areas. The proposed new groups or geographic areas meet

the requirements established pursuant to section 370.080(2), RSMo 2000.

Credit Union	Proposed New Group or Geographic Area
CommunityAmerica Credit Union 11125 Ambassador Drive Suite 100 Kansas City, MO 64195	Those who live or work in Jackson County, Missouri.

**Title 12—DEPARTMENT OF REVENUE****Division 10—Director of Revenue****Chapter 43—Investment of Nonstate Funds****IN ADDITION****12 CSR 10-43.030 Collateral Requirements for Nonstate Funds**

The proposed amendment which was published in the March 15, 2002 *Missouri Register* (27 MoReg 464-465) had a typographical error in paragraph (3)(A)2. It is printed correctly here. This amendment will appear correctly in the July 31, 2002 update to the *Code of State Regulations*.

(3)(A)2. **The entire value of the nonstate funds on deposit with the depository, including /A/accrued interest for time deposits, must be covered by the market value of securities pledged less applicable FDIC or other like insurance.**

**T**he Secretary of State is required by sections 347.141 and 359.481, RSMo 2000 to publish dissolutions of limited liability companies and limited partnerships. The content requirements for the one-time publishing of these notices are prescribed by statute. This listing is published pursuant to these statutes. We request that documents submitted for publication in this section be submitted in camera ready 8 1/2" x 11" manuscript.

## NOTICE OF WINDING UP OF LIMITED LIABILITY COMPANY

NOTICE OF WINDING UP TO ALL CREDITORS OF AND CLAIMANTS AGAINST  
GREATER ST. LOUIS TREATMENT NETWORK, L.L.C., a Missouri limited liability company.

On June 3, 2002, Greater St. Louis Treatment Network, L.L.C., a Missouri limited liability company (the "Company"), filed its Notice of Winding Up for Limited Liability Company with the Missouri Secretary of State. Said Notice was effective on June 3, 2002.

The Company requests that all persons and organizations who have claims against it present them by letter to the LLC to the attention of Christina Randolph at Greensfelder, Hemker & Gale, P.C., 10 S. Broadway, Suite 2000, St. Louis, Missouri 63102.

All claims must include (i) the name and address of the claimant; (ii) the amount claimed; (iii) the basis for the claim; (iv) the date(s) on which the event(s) on which the claim is based occurred, and (v) any other documentation of the claim.

**NOTICE: Pursuant to Section 347.141 RSMo., any claims against the Company will be barred unless a proceeding to enforce the claim is commenced within three (3) years after the publication date of the notice.**

Authorized Representative: Debra J. Spaethe

## NOTICE OF DISSOLUTION OF CORPORATION

NOTICE OF DISSOLUTION TO ALL CREDITORS OF AND CLAIMANTS AGAINST SDA CLOSURE CORP. (formerly known as SIMMONS, DURHAM & ASSOCIATES, INC.), a Missouri corporation.

On December 31, 2001, SDA Closure Corp. (formerly known as Simmons, Durham & Associates, Inc.), a Missouri corporation (the "Corporation"), filed its Articles of Dissolution with the Missouri Secretary of State. Dissolution was effective on December 31, 2001.

The Corporation requests that all persons and organizations who have claims against it present them by letter to the Corporation to the attention of John W. Dillane at Greensfelder, Hemker & Gale, P.C., 10 S. Broadway, Suite 2000, St. Louis, Missouri 63102.

All claims must include (i) the name and address of the claimant; (ii) the amount claimed; (iii) the basis for the claim; and (iv) the date(s) on which the event(s) on which the claim is based occurred.

**NOTICE: Pursuant to Section 351.482 RSMo., any claims against the Corporation will be barred unless a proceeding to enforce the claim is commenced within two years after the publication date of the two notices authorized by 351.482 RSMo., whichever is published last.**

Authorized Representative: Christopher W. Wittenauer

**OFFICE OF ADMINISTRATION  
Division of Purchasing**

**BID OPENINGS**

Sealed Bids in one (1) copy will be received by the Division of Purchasing, Room 580, Truman Building, PO Box 809, Jefferson City, MO 65102, telephone (573) 751-2387 at 2:00 p.m. on dates specified below for various agencies throughout Missouri. Bids are available to download via our homepage: [www.moolb.state.mo.us](http://www.moolb.state.mo.us). Prospective bidders may receive specifications upon request.

B3E02229 Printing: 2003 Natural Events Calendar 7/15/02;  
B3Z02164 Pharmacy Services 7/15/02;  
B1E02333 Equipment: Digital Plate Maker 7/16/02;  
B3Z02186 Case Management Co-Occurring Substance Abuse & Mental Health Disorders 7/16/02;  
B2E03002 Video Switch Matrix (vsm) 7/17/02;  
B3Z02207 International Economic Development Exchange Program 7/17/02;  
B1E02307 Staining Products & Supplies 7/19/02;  
B3Z02231 Banking Services 7/19/02;  
B3E02243 Medical Waste Disposal Services 7/22/02;  
B3E02246 Appraisal Services 7/22/02;  
B3Z02189 Program Management Services: "Emergency Response Plan to HIV/AIDS in the African American Community" 7/23/02;  
B3Z02240 Transportation Services 7/23/02;  
B1E02258 Building Construction & Repair 7/24/02;  
B1E02334 Fabric: Pique 7/24/02;  
B3Z02239 Revenue Maximization 8/6/02;  
B3Z02218 Actuarial Services 8/9/02;  
B3Z02199 Actuarial Services 8/26/02.

It is the intent of the State of Missouri, Division of Purchasing to purchase the following as a single feasible source without competitive bids. If suppliers exist other than the one identified, contact (573) 751-2387 immediately.

Uniform Commercial Code (UCC) System Expanded Software Development Services, supplied by Office Automation Solutions.

James Miluski, CPPO,  
Director of Purchasing



# Rule Changes Since Update to Code of State Regulations

This cumulative table gives you the latest status of rules. It contains citations of rulemakings adopted or proposed after deadline for the monthly Update Service to the *Code of State Regulations*, citations are to volume and page number in the *Missouri Register*, except for material in this issue. The first number in the table cite refers to the volume number or the publication year—25 (2000), 26 (2001) and 27 (2002). MoReg refers to *Missouri Register* and the numbers refer to a specific *Register* page, R indicates a rescission, W indicates a withdrawal, S indicates a statement of actual cost, T indicates an order terminating a rule, N.A. indicates not applicable and RUC indicates a rule under consideration.

Rule Number	Agency	Emergency	Proposed	Order	In Addition
<b>OFFICE OF ADMINISTRATION</b>					
1 CSR 10	State Officials' Salary Compensation Schedule .....				25 MoReg 2478
	..... This Issue .....		This Issue		27 MoReg 189
1 CSR 10-11.010	Commissioner of Administration .....				
1 CSR 15-2.200	Administrative Hearing Commission .....		27 MoReg 1093R		
1 CSR 15-2.210	Administrative Hearing Commission .....		27 MoReg 1093R		
1 CSR 15-2.230	Administrative Hearing Commission .....		27 MoReg 1093R		
1 CSR 15-2.250	Administrative Hearing Commission .....		27 MoReg 1094R		
1 CSR 15-2.270	Administrative Hearing Commission .....		27 MoReg 1094R		
1 CSR 15-2.290	Administrative Hearing Commission .....		27 MoReg 1094R		
1 CSR 15-2.320	Administrative Hearing Commission .....		27 MoReg 1095R		
1 CSR 15-2.350	Administrative Hearing Commission .....		27 MoReg 1095R		
1 CSR 15-2.380	Administrative Hearing Commission .....		27 MoReg 1095R		
1 CSR 15-2.390	Administrative Hearing Commission .....		27 MoReg 1095R		
1 CSR 15-2.410	Administrative Hearing Commission .....		27 MoReg 1096R		
1 CSR 15-2.420	Administrative Hearing Commission .....		27 MoReg 1096R		
1 CSR 15-2.430	Administrative Hearing Commission .....		27 MoReg 1096R		
1 CSR 15-2.450	Administrative Hearing Commission .....		27 MoReg 1097R		
1 CSR 15-2.470	Administrative Hearing Commission .....		27 MoReg 1097R		
1 CSR 15-2.480	Administrative Hearing Commission .....		27 MoReg 1097R		
1 CSR 15-2.490	Administrative Hearing Commission .....		27 MoReg 1097R		
1 CSR 15-2.510	Administrative Hearing Commission .....		27 MoReg 1098R		
1 CSR 15-2.530	Administrative Hearing Commission .....		27 MoReg 1098R		
1 CSR 15-2.560	Administrative Hearing Commission .....		27 MoReg 1098R		
1 CSR 15-2.580	Administrative Hearing Commission .....		27 MoReg 1099R		
1 CSR 15-3.200	Administrative Hearing Commission .....		27 MoReg 1099		
1 CSR 15-3.210	Administrative Hearing Commission .....		27 MoReg 1099		
1 CSR 15-3.250	Administrative Hearing Commission .....		27 MoReg 1100		
1 CSR 15-3.320	Administrative Hearing Commission .....		27 MoReg 1100		
1 CSR 15-3.350	Administrative Hearing Commission .....		27 MoReg 1101		
1 CSR 15-3.380	Administrative Hearing Commission .....		27 MoReg 1101		
1 CSR 15-3.390	Administrative Hearing Commission .....		27 MoReg 1102		
1 CSR 15-3.410	Administrative Hearing Commission .....		27 MoReg 1102		
1 CSR 15-3.420	Administrative Hearing Commission .....		27 MoReg 1103		
1 CSR 15-3.425	Administrative Hearing Commission .....		27 MoReg 1103		
1 CSR 15-3.430	Administrative Hearing Commission .....		27 MoReg 1104R		
1 CSR 15-3.440	Administrative Hearing Commission .....		27 MoReg 1104		
1 CSR 15-3.450	Administrative Hearing Commission .....		27 MoReg 1105R		
1 CSR 15-3.470	Administrative Hearing Commission .....		27 MoReg 1105		
1 CSR 15-3.490	Administrative Hearing Commission .....		27 MoReg 1106		
1 CSR 15-3.580	Administrative Hearing Commission .....		27 MoReg 1106		
1 CSR 20-5.020	Personnel Advisory Board and Division of Personnel .....	27 MoReg 847			
1 CSR 40-1.090	Purchasing and Materials Management .....		27 MoReg 1107		
<b>DEPARTMENT OF AGRICULTURE</b>					
2 CSR 10-5.010	Market Development .....	26 MoReg 1305R			
	.....	26 MoReg 1305			
2 CSR 10-5.015	Market Development .....	26 MoReg 2217	27 MoReg 451	27 MoReg 1044	
2 CSR 30-2.010	Animal Health .....	26 MoReg 2257	27 MoReg 681		
	.....		27 MoReg 966		
2 CSR 30-2.011	Animal Health .....	27 MoReg 848			
2 CSR 30-2.020	Animal Health .....		27 MoReg 967		
2 CSR 30-2.040	Animal Health .....	26 MoReg 2257	27 MoReg 685		
	.....		27 MoReg 969		
2 CSR 30-6.020	Animal Health .....	26 MoReg 2258	27 MoReg 688		
	.....		27 MoReg 970		
2 CSR 70-13.045	Plant Industries .....	27 MoReg 767	27 MoReg 774		
2 CSR 70-13.050	Plant Industries .....	27 MoReg 767	27 MoReg 776		
2 CSR 80-5.010	State Milk Board .....		27 MoReg 396	27 MoReg 1044	
2 CSR 90-10.040	Weights and Measures .....	This Issue			
2 CSR 90-20.040	Weights and Measures .....		27 MoReg 454		
2 CSR 90-22.140	Weights and Measures .....		27 MoReg 454		
2 CSR 90-23.010	Weights and Measures .....		27 MoReg 454		
2 CSR 90-25.010	Weights and Measures .....		27 MoReg 455		
<b>DEPARTMENT OF CONSERVATION</b>					
3 CSR 10-4.130	Conservation Commission .....		27 MoReg 971		
3 CSR 10-4.141	Conservation Commission .....		27 MoReg 972		
3 CSR 10-5.205	Conservation Commission .....		27 MoReg 972		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
3 CSR 10-5.215	Conservation Commission		27 MoReg 973		
3 CSR 10-5.225	Conservation Commission		27 MoReg 973		
3 CSR 10-5.340	Conservation Commission		This Issue		
3 CSR 10-5.345	Conservation Commission		This Issue		
3 CSR 10-5.350	Conservation Commission		27 MoReg 973		
3 CSR 10-5.351	Conservation Commission		This Issue		
3 CSR 10-5.352	Conservation Commission		27 MoReg 974		
3 CSR 10-5.353	Conservation Commission		27 MoReg 974		
3 CSR 10-5.359	Conservation Commission		This Issue		
3 CSR 10-5.360	Conservation Commission		This Issue		
3 CSR 10-5.365	Conservation Commission		This Issue		
3 CSR 10-5.420	Conservation Commission		This Issue		
3 CSR 10-5.425	Conservation Commission		27 MoReg 974		
3 CSR 10-5.440	Conservation Commission		This Issue		
3 CSR 10-5.445	Conservation Commission		This Issue		
3 CSR 10-5.460	Conservation Commission		27 MoReg 974		
3 CSR 10-5.465	Conservation Commission		27 MoReg 975		
3 CSR 10-5.550	Conservation Commission		27 MoReg 455	27 MoReg 921	
			27 MoReg 975R		
3 CSR 10-5.551	Conservation Commission		27 MoReg 456	27 MoReg 921	
			27 MoReg 975		
3 CSR 10-5.552	Conservation Commission		27 MoReg 976		
3 CSR 10-5.553	Conservation Commission		27 MoReg 976		
3 CSR 10-5.559	Conservation Commission		27 MoReg 976		
3 CSR 10-5.575	Conservation Commission		27 MoReg 976R		
3 CSR 10-5.576	Conservation Commission		27 MoReg 977		
3 CSR 10-5.577	Conservation Commission		27 MoReg 977		
3 CSR 10-5.578	Conservation Commission		27 MoReg 977		
3 CSR 10-6.405	Conservation Commission		27 MoReg 978		
3 CSR 10-6.410	Conservation Commission		27 MoReg 978		
3 CSR 10-6.415	Conservation Commission		27 MoReg 978		
3 CSR 10-6.540	Conservation Commission		27 MoReg 979		
3 CSR 10-6.550	Conservation Commission		27 MoReg 979		
3 CSR 10-6.605	Conservation Commission		27 MoReg 979		
3 CSR 10-7.410	Conservation Commission		27 MoReg 980		
3 CSR 10-7.435	Conservation Commission		N.A.	27 MoReg 1044R	
			N.A.	27 MoReg 1044	
3 CSR 10-7.455	Conservation Commission		27 MoReg 980		
3 CSR 10-8.510	Conservation Commission		27 MoReg 981		
3 CSR 10-8.515	Conservation Commission		27 MoReg 981		
3 CSR 10-9.106	Conservation Commission		27 MoReg 982		
3 CSR 10-9.110	Conservation Commission		27 MoReg 982		
3 CSR 10-9.220	Conservation Commission		27 MoReg 983		
3 CSR 10-9.351	Conservation Commission		27 MoReg 986		
3 CSR 10-9.353	Conservation Commission	27 MoReg 547	27 MoReg 552	27 MoReg 1051	
			27 MoReg 986		
3 CSR 10-9.359	Conservation Commission		27 MoReg 986		
3 CSR 10-9.425	Conservation Commission		27 MoReg 987		
3 CSR 10-9.560	Conservation Commission		27 MoReg 987		
3 CSR 10-9.565	Conservation Commission	27 MoReg 548	27 MoReg 553	27 MoReg 1051	27 MoReg 1062
3 CSR 10-9.566	Conservation Commission	27 MoReg 549	27 MoReg 554	27 MoReg 1051	
3 CSR 10-9.570	Conservation Commission	27 MoReg 988			
3 CSR 10-9.575	Conservation Commission	27 MoReg 988			
3 CSR 10-9.625	Conservation Commission	27 MoReg 988			
3 CSR 10-9.630	Conservation Commission	27 MoReg 989R			
3 CSR 10-9.645	Conservation Commission	27 MoReg 989			
3 CSR 10-10.725	Conservation Commission		N.A.	27 MoReg 1052	
3 CSR 10-10.727	Conservation Commission		N.A.	27 MoReg 1052	
3 CSR 10-10.743	Conservation Commission		27 MoReg 990		
3 CSR 10-11.110	Conservation Commission		27 MoReg 990		
3 CSR 10-11.115	Conservation Commission		27 MoReg 990		
3 CSR 10-11.125	Conservation Commission		27 MoReg 991		
3 CSR 10-11.140	Conservation Commission		27 MoReg 991		
3 CSR 10-11.145	Conservation Commission		27 MoReg 991		
3 CSR 10-11.150	Conservation Commission		This Issue		
3 CSR 10-11.155	Conservation Commission		27 MoReg 992		
3 CSR 10-11.160	Conservation Commission		27 MoReg 992		
3 CSR 10-11.165	Conservation Commission		27 MoReg 993		
3 CSR 10-11.180	Conservation Commission		27 MoReg 993		
3 CSR 10-11.182	Conservation Commission		27 MoReg 994		
			This Issue		
3 CSR 10-11.183	Conservation Commission		27 MoReg 995		
3 CSR 10-11.186	Conservation Commission		27 MoReg 995		
3 CSR 10-11.205	Conservation Commission		27 MoReg 996		
3 CSR 10-11.210	Conservation Commission		27 MoReg 996		
3 CSR 10-11.215	Conservation Commission		27 MoReg 997		
3 CSR 10-12.110	Conservation Commission		27 MoReg 998		
3 CSR 10-12.125	Conservation Commission		27 MoReg 998		
3 CSR 10-12.135	Conservation Commission		27 MoReg 998		
3 CSR 10-12.140	Conservation Commission		27 MoReg 998		
3 CSR 10-12.145	Conservation Commission		27 MoReg 999		
3 CSR 10-20.805	Conservation Commission		27 MoReg 1000		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
<b>DEPARTMENT OF ECONOMIC DEVELOPMENT</b>					
4 CSR 100	Division of Credit Unions.....				27 MoReg 821
	.....				27 MoReg 923
	.....				27 MoReg 1062
	.....				27 MoReg 1124
	.....				This Issue
4 CSR 110-2.131	Missouri Dental Board.....	27 MoReg 549	27 MoReg 554	.....	This Issue
4 CSR 110-2.132	Missouri Dental Board.....		27 MoReg 555	.....	This Issue
4 CSR 140-1.010	Division of Finance.....		27 MoReg 456	.....	27 MoReg 1112
4 CSR 140-2.067	Division of Finance.....		27 MoReg 457	.....	27 MoReg 1112
4 CSR 140-2.070	Division of Finance.....		27 MoReg 458	.....	27 MoReg 1112
4 CSR 140-10.010	Division of Finance.....		27 MoReg 458R	.....	27 MoReg 1113R
4 CSR 140-10.030	Division of Finance.....		27 MoReg 458	.....	27 MoReg 1113
4 CSR 140-11.010	Division of Finance.....		27 MoReg 459R		
4 CSR 140-11.020	Division of Finance.....		27 MoReg 459R		
4 CSR 140-11.030	Division of Finance.....		27 MoReg 459		
4 CSR 140-11.040	Division of Finance.....		27 MoReg 461		
4 CSR 140-12.010	Division of Finance.....		27 MoReg 461	.....	27 MoReg 1113
4 CSR 140-13.010	Division of Finance.....		27 MoReg 462	.....	27 MoReg 1113
4 CSR 140-29.010	Division of Finance.....		27 MoReg 463	.....	27 MoReg 1113
4 CSR 150-2.030	State Board of Registration for the Healing Arts.....		27 MoReg 860		
4 CSR 150-2.040	State Board of Registration for the Healing Arts.....		27 MoReg 860		
4 CSR 150-2.060	State Board of Registration for the Healing Arts.....		27 MoReg 860		
4 CSR 150-2.080	State Board of Registration for the Healing Arts.....		27 MoReg 776		
4 CSR 150-2.155	State Board of Registration for the Healing Arts.....		27 MoReg 861		
4 CSR 150-4.010	State Board of Registration for the Healing Arts.....		27 MoReg 861		
4 CSR 150-4.060	State Board of Registration for the Healing Arts.....		27 MoReg 861		
4 CSR 150-6.050	State Board of Registration for the Healing Arts.....		27 MoReg 862		
4 CSR 150-7.200	State Board of Registration for the Healing Arts.....		27 MoReg 862		
4 CSR 150-8.060	State Board of Registration for the Healing Arts.....		27 MoReg 862		
4 CSR 220-2.085	State Board of Pharmacy.....				26 MoReg 2433
4 CSR 220-3.040	State Board of Pharmacy.....		27 MoReg 777		
4 CSR 240-2.075	Public Service Commission.....		27 MoReg 691		
4 CSR 240-2.080	Public Service Commission.....		27 MoReg 1107		
4 CSR 240-2.115	Public Service Commission.....		27 MoReg 691		
4 CSR 240-2.117	Public Service Commission.....		27 MoReg 692		
4 CSR 240-13.055	Public Service Commission.....	26 MoReg 2259			
4 CSR 255-2.050	Missouri Board for Respiratory Care.....		27 MoReg 780		
4 CSR 255-2.060	Missouri Board for Respiratory Care.....		27 MoReg 780		
4 CSR 265-8.060	Motor Carrier and Railroad Safety.....				26 MoReg 2181
<b>DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION</b>					
5 CSR 50-340.030	Division of School Improvement.....		27 MoReg 693		
5 CSR 50-340.050	Division of School Improvement.....		27 MoReg 555R	.....	27 MoReg 1114W
	.....		27 MoReg 555	.....	27 MoReg 1114W
5 CSR 50-340.110	Division of School Improvement.....		27 MoReg 693		
5 CSR 80-800.380	Teacher Quality and Urban Education.....		27 MoReg 559		
5 CSR 80-850.010	Teacher Quality and Urban Education.....		27 MoReg 694R		
	.....		27 MoReg 695		
<b>DEPARTMENT OF TRANSPORTATION</b>					
7 CSR 10-14.020	Missouri Highways and Transportation Commission.....		27 MoReg 312	.....	This Issue
7 CSR 10-14.030	Missouri Highways and Transportation Commission.....		27 MoReg 312	.....	This Issue
7 CSR 10-14.040	Missouri Highways and Transportation Commission.....		27 MoReg 313	.....	This Issue
7 CSR 10-14.050	Missouri Highways and Transportation Commission.....		27 MoReg 314	.....	This Issue
7 CSR 10-14.060	Missouri Highways and Transportation Commission.....		27 MoReg 315	.....	This Issue
7 CSR 10-23.010	Missouri Highways and Transportation Commission.....		27 MoReg 1002		
7 CSR 10-23.020	Missouri Highways and Transportation Commission.....		27 MoReg 1002		
7 CSR 10-23.030	Missouri Highways and Transportation Commission.....		27 MoReg 1008		
<b>DEPARTMENT OF LABOR AND INDUSTRIAL RELATIONS</b>					
8 CSR 10-4.180	Division of Employment Security.....	This Issue		This Issue	
8 CSR 10-5.010	Division of Employment Security.....		27 MoReg 780		
8 CSR 10-5.015	Division of Employment Security.....		27 MoReg 782		
8 CSR 10-5.030	Division of Employment Security.....		27 MoReg 785R		
	.....		27 MoReg 785		
8 CSR 10-5.040	Division of Employment Security.....		27 MoReg 785R		
	.....		27 MoReg 786		
8 CSR 10-5.050	Division of Employment Security.....		27 MoReg 786		
8 CSR 20-8.010	Labor and Industrial Relations Commission.....		27 MoReg 399	.....	27 MoReg 1053
8 CSR 50-8.010	Workers' Compensation.....		27 MoReg 315	.....	27 MoReg 1114
<b>DEPARTMENT OF MENTAL HEALTH</b>					
9 CSR 10-1.010	Director, Department of Mental Health.....		27 MoReg 863		
9 CSR 10-5.200	Director, Department of Mental Health.....	27 MoReg 615			
9 CSR 10-7.060	Director, Department of Mental Health.....		27 MoReg 787		
9 CSR 10-7.070	Director, Department of Mental Health.....		27 MoReg 788		
9 CSR 10-7.140	Director, Department of Mental Health.....		27 MoReg 788		
9 CSR 30-3.032	Certification Standards.....		27 MoReg 620		
9 CSR 30-3.120	Certification Standards.....		27 MoReg 790		
9 CSR 30-3.132	Certification Standards.....		27 MoReg 620		
9 CSR 30-3.140	Certification Standards.....		27 MoReg 790		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
9 CSR 30-3.192	Certification Standards.....		27 MoReg 790		
9 CSR 30-3.206	Certification Standards.....		27 MoReg 621		
9 CSR 45-3.050	Division of Mental Retardation and Developmental Disabilities .....		27 MoReg 622R		
9 CSR 45-5.060	Division of Mental Retardation and Developmental Disabilities .....	27 MoReg 389	27 MoReg 399		This Issue
<b>DEPARTMENT OF NATURAL RESOURCES</b>					
10 CSR 10	Air Conservation Commission .....				27 MoReg 652
10 CSR 10-2.080	Air Conservation Commission.....		27 MoReg 564		
10 CSR 10-2.260	Air Conservation Commission.....		27 MoReg 699		
10 CSR 10-2.280	Air Conservation Commission.....		27 MoReg 1107R		
10 CSR 10-3.060	Air Conservation Commission.....		27 MoReg 699		
10 CSR 10-4.040	Air Conservation Commission.....		27 MoReg 700		
10 CSR 10-5.180	Air Conservation Commission.....		27 MoReg 564		
10 CSR 10-5.320	Air Conservation Commission.....		27 MoReg 1108R		
10 CSR 10-5.380	Air Conservation Commission.....		27 MoReg 1010		
10 CSR 10-6.070	Air Conservation Commission .....		27 MoReg 402		
10 CSR 10-6.075	Air Conservation Commission.....		27 MoReg 403		
10 CSR 10-6.080	Air Conservation Commission .....		27 MoReg 405		
10 CSR 10-6.110	Air Conservation Commission.....		27 MoReg 318		This Issue
10 CSR 10-6.130	Air Conservation Commission.....		27 MoReg 622		
10 CSR 10-6.220	Air Conservation Commission.....		27 MoReg 564		
10 CSR 10-6.320	Air Conservation Commission.....		27 MoReg 1108		
10 CSR 20-4.023	Clean Water Commission.....		26 MoReg 860		
10 CSR 20-4.043	Clean Water Commission.....		26 MoReg 861		
10 CSR 20-7.040	Clean Water Commission.....		27 MoReg 235		
10 CSR 25-3.260	Hazardous Waste Management Commission .....		27 MoReg 110	27 MoReg 1115	
10 CSR 25-6.263	Hazardous Waste Management Commission .....		27 MoReg 112	27 MoReg 1115	
10 CSR 25-12.010	Hazardous Waste Management Commission .....		27 MoReg 115	27 MoReg 1116	
			27 MoReg 702		
10 CSR 40-10.020	Land Reclamation Commission .....		26 MoReg 1798		
			27 MoReg 626		
10 CSR 40-10.050	Land Reclamation Commission .....		26 MoReg 1798		
10 CSR 60-4.050	Public Drinking Water Program.....		27 MoReg 325		
10 CSR 60-4.060	Public Drinking Water Program.....		27 MoReg 329R		
			27 MoReg 329		
10 CSR 70-1.010	Soil and Water Districts Commission .....		27 MoReg 247	27 MoReg 1116	
<b>DEPARTMENT OF PUBLIC SAFETY</b>					
11 CSR 30-7.010	Office of the Director .....	27 MoReg 550	27 MoReg 565		This Issue
11 CSR 40-6.060	Division of Fire Safety .....	26 MoReg 857			
11 CSR 45-3.010	Missouri Gaming Commission .....		27 MoReg 865		
11 CSR 45-4.260	Missouri Gaming Commission .....		27 MoReg 405	27 MoReg 1117	
11 CSR 45-5.070	Missouri Gaming Commission .....		27 MoReg 565		
11 CSR 45-5.075	Missouri Gaming Commission .....		27 MoReg 568		
11 CSR 45-5.183	Missouri Gaming Commission .....		27 MoReg 1110		
11 CSR 45-6.020	Missouri Gaming Commission .....		27 MoReg 123	27 MoReg 921	
11 CSR 45-6.025	Missouri Gaming Commission .....		27 MoReg 126	27 MoReg 921	
11 CSR 45-7.040	Missouri Gaming Commission .....				26 MoReg 2184
11 CSR 45-9.030	Missouri Gaming Commission .....		27 MoReg 568		
11 CSR 45-30.025	Missouri Gaming Commission .....		27 MoReg 571		
11 CSR 45-30.355	Missouri Gaming Commission .....		27 MoReg 406	27 MoReg 1117	
11 CSR 45-30.570	Missouri Gaming Commission .....		27 MoReg 1110		
11 CSR 75-1.010	Peace Officer Standards and Training .....		27 MoReg 865R		
			27 MoReg 865		
11 CSR 75-2.010	Peace Officer Standards and Training .....		27 MoReg 866R		
			27 MoReg 866		
11 CSR 75-3.010	Peace Officer Standards and Training .....		27 MoReg 867R		
11 CSR 75-3.020	Peace Officer Standards and Training .....		27 MoReg 867R		
11 CSR 75-3.030	Peace Officer Standards and Training .....		27 MoReg 867R		
11 CSR 75-3.040	Peace Officer Standards and Training .....		27 MoReg 868R		
11 CSR 75-3.050	Peace Officer Standards and Training .....		27 MoReg 868R		
11 CSR 75-3.060	Peace Officer Standards and Training .....		27 MoReg 868R		
11 CSR 75-3.070	Peace Officer Standards and Training .....		27 MoReg 868R		
11 CSR 75-3.080	Peace Officer Standards and Training .....		27 MoReg 869R		
11 CSR 75-4.010	Peace Officer Standards and Training .....		27 MoReg 869R		
11 CSR 75-4.020	Peace Officer Standards and Training .....		27 MoReg 869R		
11 CSR 75-4.030	Peace Officer Standards and Training .....		27 MoReg 870R		
11 CSR 75-4.040	Peace Officer Standards and Training .....		27 MoReg 870R		
11 CSR 75-4.050	Peace Officer Standards and Training .....		27 MoReg 870R		
11 CSR 75-5.010	Peace Officer Standards and Training .....		27 MoReg 870R		
11 CSR 75-5.020	Peace Officer Standards and Training .....		27 MoReg 871R		
11 CSR 75-5.030	Peace Officer Standards and Training .....		27 MoReg 871R		
11 CSR 75-5.040	Peace Officer Standards and Training .....		27 MoReg 871R		
11 CSR 75-6.010	Peace Officer Standards and Training .....		27 MoReg 871R		
11 CSR 75-6.020	Peace Officer Standards and Training .....		27 MoReg 872R		
11 CSR 75-6.030	Peace Officer Standards and Training .....		27 MoReg 872R		
11 CSR 75-7.010	Peace Officer Standards and Training .....		27 MoReg 872R		
11 CSR 75-8.010	Peace Officer Standards and Training .....		27 MoReg 873R		
11 CSR 75-8.020	Peace Officer Standards and Training .....		27 MoReg 873R		
11 CSR 75-8.030	Peace Officer Standards and Training .....		27 MoReg 873R		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
11 CSR 75-9.010	Peace Officer Standards and Training .....		27 MoReg 873R		
11 CSR 75-9.020	Peace Officer Standards and Training .....		27 MoReg 874R		
11 CSR 75-9.030	Peace Officer Standards and Training .....		27 MoReg 874R		
11 CSR 75-10.010	Peace Officer Standards and Training .....		27 MoReg 874R		
11 CSR 75-10.020	Peace Officer Standards and Training .....		27 MoReg 875R		
11 CSR 75-10.030	Peace Officer Standards and Training .....		27 MoReg 875R		
11 CSR 75-10.040	Peace Officer Standards and Training .....		27 MoReg 875R		
11 CSR 75-10.050	Peace Officer Standards and Training .....		27 MoReg 875R		
11 CSR 75-10.060	Peace Officer Standards and Training .....		27 MoReg 876R		
11 CSR 75-10.070	Peace Officer Standards and Training .....		27 MoReg 876R		
11 CSR 75-10.080	Peace Officer Standards and Training .....		27 MoReg 876R		
11 CSR 75-10.100	Peace Officer Standards and Training .....		27 MoReg 876R		
11 CSR 75-11.010	Peace Officer Standards and Training .....		27 MoReg 877R		
11 CSR 75-11.020	Peace Officer Standards and Training .....		27 MoReg 877R		
11 CSR 75-11.030	Peace Officer Standards and Training .....		27 MoReg 877R		
11 CSR 75-11.035	Peace Officer Standards and Training .....		27 MoReg 878R		
11 CSR 75-11.050	Peace Officer Standards and Training .....		27 MoReg 878R		
11 CSR 75-11.060	Peace Officer Standards and Training .....		27 MoReg 878R		
11 CSR 75-11.070	Peace Officer Standards and Training .....		27 MoReg 878R		
11 CSR 75-11.080	Peace Officer Standards and Training .....		27 MoReg 879R		
11 CSR 75-12.010	Peace Officer Standards and Training .....		27 MoReg 879R		
11 CSR 75-12.020	Peace Officer Standards and Training .....		27 MoReg 879R		
11 CSR 75-12.030	Peace Officer Standards and Training .....		27 MoReg 880R		
11 CSR 75-13.010	Peace Officer Standards and Training .....		27 MoReg 880		
11 CSR 75-13.020	Peace Officer Standards and Training .....		27 MoReg 880		
11 CSR 75-13.030	Peace Officer Standards and Training .....		27 MoReg 881		
11 CSR 75-13.040	Peace Officer Standards and Training .....		27 MoReg 881		
11 CSR 75-13.050	Peace Officer Standards and Training .....		27 MoReg 882		
11 CSR 75-13.060	Peace Officer Standards and Training .....		27 MoReg 882		
11 CSR 75-13.070	Peace Officer Standards and Training .....		27 MoReg 883		
11 CSR 75-13.080	Peace Officer Standards and Training .....		27 MoReg 883		
11 CSR 75-13.090	Peace Officer Standards and Training .....		27 MoReg 883		
11 CSR 75-13.100	Peace Officer Standards and Training .....		27 MoReg 884		
11 CSR 75-14.010	Peace Officer Standards and Training .....		27 MoReg 884		
11 CSR 75-14.020	Peace Officer Standards and Training .....		27 MoReg 885		
11 CSR 75-14.030	Peace Officer Standards and Training .....		27 MoReg 886		
11 CSR 75-14.040	Peace Officer Standards and Training .....		27 MoReg 886		
11 CSR 75-14.050	Peace Officer Standards and Training .....		27 MoReg 887		
11 CSR 75-14.060	Peace Officer Standards and Training .....		27 MoReg 888		
11 CSR 75-14.070	Peace Officer Standards and Training .....		27 MoReg 888		
11 CSR 75-14.080	Peace Officer Standards and Training .....		27 MoReg 889		
11 CSR 75-15.010	Peace Officer Standards and Training .....		27 MoReg 889		
11 CSR 75-15.020	Peace Officer Standards and Training .....		27 MoReg 890		
11 CSR 75-15.030	Peace Officer Standards and Training .....		27 MoReg 891		
11 CSR 75-15.040	Peace Officer Standards and Training .....		27 MoReg 892		
11 CSR 75-15.050	Peace Officer Standards and Training .....		27 MoReg 892		
11 CSR 75-15.060	Peace Officer Standards and Training .....		27 MoReg 892		
11 CSR 75-15.070	Peace Officer Standards and Training .....		27 MoReg 893		
11 CSR 75-16.010	Peace Officer Standards and Training .....		27 MoReg 893		
<b>DEPARTMENT OF REVENUE</b>					
12 CSR	Construction Transient Employers .....		27 MoReg 416		
					27 MoReg 925
12 CSR 10-2.005	Director of Revenue .....		27 MoReg 791R		
12 CSR 10-2.015	Director of Revenue .....		27 MoReg 707		
12 CSR 10-2.040	Director of Revenue .....		27 MoReg 792R		
12 CSR 10-2.065	Director of Revenue .....		27 MoReg 792R		
12 CSR 10-2.145	Director of Revenue .....		27 MoReg 792R		
12 CSR 10-2.165	Director of Revenue .....		27 MoReg 338.....	27 MoReg 922	
12 CSR 10-2.175	Director of Revenue .....		27 MoReg 792R		
12 CSR 10-3.008	Director of Revenue .....		27 MoReg 707R		
12 CSR 10-3.031	Director of Revenue .....		27 MoReg 707R		
12 CSR 10-3.034	Director of Revenue .....		27 MoReg 708R		
12 CSR 10-3.042	Director of Revenue .....		27 MoReg 708R		
12 CSR 10-3.044	Director of Revenue .....		27 MoReg 708R		
12 CSR 10-3.116	Director of Revenue .....		27 MoReg 708R		
12 CSR 10-3.144	Director of Revenue .....		27 MoReg 709R		
12 CSR 10-3.158	Director of Revenue .....		27 MoReg 709R		
12 CSR 10-3.179	Director of Revenue .....		27 MoReg 709R		
12 CSR 10-3.233	Director of Revenue .....		27 MoReg 709R		
12 CSR 10-3.240	Director of Revenue .....		27 MoReg 793R		
12 CSR 10-3.245	Director of Revenue .....		27 MoReg 793R		
12 CSR 10-3.247	Director of Revenue .....		27 MoReg 793R		
12 CSR 10-3.250	Director of Revenue .....		27 MoReg 793R		
12 CSR 10-3.254	Director of Revenue .....		27 MoReg 794R		
12 CSR 10-3.256	Director of Revenue .....		27 MoReg 794R		
12 CSR 10-3.258	Director of Revenue .....		27 MoReg 794R		
12 CSR 10-3.292	Director of Revenue .....		27 MoReg 794R		
12 CSR 10-3.294	Director of Revenue .....		27 MoReg 795R		
12 CSR 10-3.300	Director of Revenue .....		27 MoReg 795R		
12 CSR 10-8.040	Director of Revenue .....		27 MoReg 710R		
12 CSR 10-8.050	Director of Revenue .....		27 MoReg 710R		
12 CSR 10-8.060	Director of Revenue .....		27 MoReg 710R		
12 CSR 10-8.070	Director of Revenue .....		27 MoReg 710R		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
12 CSR 10-8.080	Director of Revenue .....		27 MoReg 711R		
12 CSR 10-8.090	Director of Revenue .....		27 MoReg 711R		
12 CSR 10-8.100	Director of Revenue .....		27 MoReg 711R		
12 CSR 10-8.110	Director of Revenue .....		27 MoReg 711R		
12 CSR 10-8.130	Director of Revenue .....		27 MoReg 712R		
12 CSR 10-8.140	Director of Revenue .....		27 MoReg 712R		
12 CSR 10-8.150	Director of Revenue .....		27 MoReg 712R		
12 CSR 10-24.190	Director of Revenue .....	27 MoReg 768	27 MoReg 795		
12 CSR 10-24.326	Director of Revenue .....	27 MoReg 768	27 MoReg 795		
12 CSR 10-41.030	Director of Revenue .....		27 MoReg 338	27 MoReg 922	
12 CSR 10-43.030	Director of Revenue .....		27 MoReg 464	27 MoReg 1117	This Issue
12 CSR 10-102.016	Director of Revenue .....		27 MoReg 712		
12 CSR 10-103.395	Director of Revenue .....		27 MoReg 713		
12 CSR 10-108.700	Director of Revenue .....		27 MoReg 713		
12 CSR 10-113.200	Director of Revenue .....		27 MoReg 339	27 MoReg 922	
12 CSR 10-117.100	Director of Revenue .....		27 MoReg 340	27 MoReg 922	
12 CSR 30-3.010	State Tax Commission .....		This IssueR		
	.....		This Issue		
12 CSR 30-4.010	State Tax Commission .....		27 MoReg 250		
<b>DEPARTMENT OF SOCIAL SERVICES</b>					
13 CSR 15-4.050	Division of Aging .....		27 MoReg 486	27 MoReg 1120	
	(Changed to 19 CSR 15-4.050)				
13 CSR 40-2.140	Division of Family Services .....	This Issue	This Issue		
13 CSR 40-2.375	Division of Family Services .....	This Issue	This Issue		
13 CSR 40-30.020	Division of Family Services .....	27 MoReg 391	27 MoReg 406	27 MoReg 1053	
13 CSR 40-30.030	Division of Family Services .....	This Issue	This Issue		
13 CSR 40-60.050	Division of Family Services .....		27 MoReg 341	27 MoReg 1053	
13 CSR 70-4.090	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-10.150	Division of Medical Services .....			27 MoReg 1125	
13 CSR 70-15.010	Division of Medical Services .....	27 MoReg 1089	27 MoReg 894		
13 CSR 70-15.040	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-15.110	Division of Medical Services .....	27 MoReg 1091	27 MoReg 898		
13 CSR 70-15.160	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-15.170	Division of Medical Services .....	This Issue			
13 CSR 70-20.031	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-20.032	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-20.034	Division of Medical Services .....	This Issue	This Issue		
13 CSR 70-20.200	Division of Medical Services .....	27 MoReg 963	27 MoReg 1110		
13 CSR 70-20.250	Division of Medical Services .....	27 MoReg 963	27 MoReg 1111		
13 CSR 70-20.320	Division of Medical Services .....	This Issue			
13 CSR 70-35.010	Division of Medical Services .....	This Issue			
13 CSR 70-40.010	Division of Medical Services .....	This Issue			
13 CSR 73-2.015	Missouri Board of Nursing				
	Home Administrators .....	27 MoReg 5	27 MoReg 19	27 MoReg 726	
13 CSR 73-2.070	Missouri Board of Nursing				
	Home Administrators .....	27 MoReg 5	27 MoReg 20	27 MoReg 726	
<b>ELECTED OFFICIALS</b>					
15 CSR 30-45.030	Secretary of State .....		27 MoReg 407R	27 MoReg 1054R	
	.....		27 MoReg 407	27 MoReg 1054	27 MoReg 1062
15 CSR 30-50.010	Secretary of State .....		27 MoReg 129	27 MoReg 1054	
15 CSR 30-50.020	Secretary of State .....		27 MoReg 130R	27 MoReg 1055R	
	.....		27 MoReg 130	27 MoReg 1055	
15 CSR 30-50.030	Secretary of State .....		27 MoReg 131R	27 MoReg 1055R	
	.....		27 MoReg 131	27 MoReg 1056	
15 CSR 30-50.040	Secretary of State .....		27 MoReg 132R	27 MoReg 1056R	
	.....		27 MoReg 132	27 MoReg 1056	
15 CSR 30-50.120	Secretary of State .....		27 MoReg 133R	27 MoReg 1057R	
15 CSR 30-50.130	Secretary of State .....		27 MoReg 134R	27 MoReg 1057R	
15 CSR 30-50.150	Secretary of State .....		27 MoReg 134R	27 MoReg 1057R	
15 CSR 30-50.160	Secretary of State .....		27 MoReg 134R	27 MoReg 1057R	
15 CSR 30-50.170	Secretary of State .....		27 MoReg 134R	27 MoReg 1057R	
15 CSR 30-50.180	Secretary of State .....		27 MoReg 135R	27 MoReg 1057R	
15 CSR 30-50.210	Secretary of State .....		27 MoReg 135R	27 MoReg 1058R	
15 CSR 30-50.220	Secretary of State .....		27 MoReg 135R	27 MoReg 1058R	
15 CSR 30-51.010	Secretary of State .....		27 MoReg 135	27 MoReg 1058	
15 CSR 30-51.020	Secretary of State .....		27 MoReg 136R	27 MoReg 1058R	
	.....		27 MoReg 136	27 MoReg 1058	
15 CSR 30-51.030	Secretary of State .....		27 MoReg 138R	27 MoReg 1059R	
	.....		27 MoReg 138	27 MoReg 1059	
15 CSR 30-51.160	Secretary of State .....		27 MoReg 139R	27 MoReg 1060R	
	.....		27 MoReg 139	27 MoReg 1060	
15 CSR 30-51.180	Secretary of State .....		27 MoReg 251	27 MoReg 1061	
15 CSR 30-54.290	Secretary of State .....		27 MoReg 251	27 MoReg 1061	
<b>RETIREMENT SYSTEMS</b>					
16 CSR 10-4.014	The Public School Retirement System of Missouri .....		27 MoReg 465	27 MoReg 1061	
16 CSR 10-6.040	The Public School Retirement System of Missouri .....		27 MoReg 465	27 MoReg 1061	
16 CSR 50-10.010	The County Employees' Retirement Fund .....		27 MoReg 900		

Rule Number	Agency	Emergency	Proposed	Order	In Addition
16 CSR 50-10.030	The County Employees' Retirement Fund.....	27	MoReg 900		
16 CSR 50-10.040	The County Employees' Retirement Fund.....	27	MoReg 901		
16 CSR 50-10.050	The County Employees' Retirement Fund.....	27	MoReg 902		
16 CSR 50-10.070	The County Employees' Retirement Fund.....	27	MoReg 903		
16 CSR 50-20.030	The County Employees' Retirement Fund.....	27	MoReg 903		
16 CSR 50-20.050	The County Employees' Retirement Fund.....	27	MoReg 903		
16 CSR 50-20.070	The County Employees' Retirement Fund.....	27	MoReg 904		
16 CSR 50-20.080	The County Employees' Retirement Fund.....	27	MoReg 905		
<b>BOARDS OF POLICE COMMISSIONERS</b>					
17 CSR 20-2.015	St. Louis Board of Police Commissioners.....	27	MoReg 466.....	27	MoReg 1118
17 CSR 20-2.025	St. Louis Board of Police Commissioners.....	27	MoReg 467.....	27	MoReg 1118
17 CSR 20-2.035	St. Louis Board of Police Commissioners.....	27	MoReg 467.....	27	MoReg 1118
17 CSR 20-2.045	St. Louis Board of Police Commissioners.....	27	MoReg 469.....	27	MoReg 1118
17 CSR 20-2.055	St. Louis Board of Police Commissioners.....	27	MoReg 469.....	27	MoReg 1118
17 CSR 20-2.065	St. Louis Board of Police Commissioners.....	27	MoReg 470.....	27	MoReg 1118
17 CSR 20-2.075	St. Louis Board of Police Commissioners.....	27	MoReg 270.....	27	MoReg 1119
17 CSR 20-2.085	St. Louis Board of Police Commissioners.....	27	MoReg 471.....	27	MoReg 1119
17 CSR 20-2.095	St. Louis Board of Police Commissioners.....	27	MoReg 472.....	27	MoReg 1119
17 CSR 20-2.105	St. Louis Board of Police Commissioners.....	27	MoReg 472.....	27	MoReg 1119
17 CSR 20-2.115	St. Louis Board of Police Commissioners.....	27	MoReg 474.....	27	MoReg 1119
17 CSR 20-2.125	St. Louis Board of Police Commissioners.....	27	MoReg 474.....	27	MoReg 1120
17 CSR 20-2.135	St. Louis Board of Police Commissioners.....	27	MoReg 475.....	27	MoReg 1120
<b>PUBLIC DEFENDER COMMISSION</b>					
18 CSR 10-1.010	Office of State Public Defender.....	27	MoReg 476.....	This Issue	
18 CSR 10-2.010	Office of State Public Defender.....	27	MoReg 477.....	This Issue	
18 CSR 10-3.010	Office of State Public Defender.....	27	MoReg 477.....	This Issue	
<b>DEPARTMENT OF HEALTH AND SENIOR SERVICES</b>					
19 CSR 10-2.010	Office of the Director.....	27	MoReg 800		
19 CSR 10-3.030	Office of the Director.....	27	MoReg 801R		
			27	MoReg 801	
19 CSR 10-4.010	Office of the Director.....	27	MoReg 478R.....	This IssueR	
			27	MoReg 478.....	This Issue
19 CSR 10-4.040	Office of the Director.....	27	MoReg 550.....	27	MoReg 571..... This Issue
19 CSR 10-4.050	Office of the Director.....	27	MoReg 482.....	27	MoReg 1120
19 CSR 15-4.050	Division of Senior Services.....	27	MoReg 486.....	27	MoReg 1120
	(Changed from 13 CSR 15-4.050)				
19 CSR 20-3.050	Division of Environmental Health and Communicable Disease Prevention.....			27	MoReg 584
19 CSR 20-20.040	Division of Environmental Health and Communicable Disease Prevention.....	This Issue	This Issue		
19 CSR 20-26.050	Division of Environmental Health and Communicable Disease Prevention.....	27	MoReg 964.....	27	MoReg 1032
19 CSR 20-26.060	Division of Environmental Health and Communicable Disease Prevention.....	27	MoReg 964.....	27	MoReg 1032
19 CSR 25-36.010	Division of Administration.....	27	MoReg 805		
19 CSR 25-38.020	Division of Administration.....	27	MoReg 392.....	27	MoReg 408..... 27 MoReg 1120
19 CSR 60-50	Missouri Health Facilities Review.....			27	MoReg 738
				27	MoReg 923
				27	MoReg 1062
				27	MoReg 1129
19 CSR 90-1.010	Missouri Senior Rx Program.....	27	MoReg 303.....	27	MoReg 341..... 27 MoReg 1120
19 CSR 90-1.020	Missouri Senior Rx Program.....	27	MoReg 303.....	27	MoReg 342..... 27 MoReg 1121
19 CSR 90-1.030	Missouri Senior Rx Program.....	27	MoReg 304.....	27	MoReg 343..... 27 MoReg 1121
19 CSR 90-1.040	Missouri Senior Rx Program.....	27	MoReg 305.....	27	MoReg 346..... 27 MoReg 1121
19 CSR 90-1.050	Missouri Senior Rx Program.....	27	MoReg 305.....	27	MoReg 346..... 27 MoReg 1122
19 CSR 90-1.060	Missouri Senior Rx Program.....	27	MoReg 306.....	27	MoReg 349..... 27 MoReg 1122
19 CSR 90-1.070	Missouri Senior Rx Program.....	27	MoReg 306.....	27	MoReg 349..... 27 MoReg 1122
19 CSR 90-1.080	Missouri Senior Rx Program.....	27	MoReg 307.....	27	MoReg 349..... 27 MoReg 1122
19 CSR 90-1.090	Missouri Senior Rx Program.....	27	MoReg 307.....	27	MoReg 350..... 27 MoReg 1122
19 CSR 90-2.010	Missouri Senior Rx Program.....	27	MoReg 308.....	27	MoReg 350..... 27 MoReg 1122
19 CSR 90-2.020	Missouri Senior Rx Program.....	27	MoReg 309.....	27	MoReg 351..... 27 MoReg 1123
19 CSR 90-2.030	Missouri Senior Rx Program.....	27	MoReg 309.....	27	MoReg 351..... 27 MoReg 1123
19 CSR 90-2.040	Missouri Senior Rx Program.....	27	MoReg 310.....	27	MoReg 352..... 27 MoReg 1123
19 CSR 90-2.050	Missouri Senior Rx Program.....	27	MoReg 310.....	27	MoReg 352..... 27 MoReg 1123
19 CSR 90-3.010	Missouri Senior Rx Program.....	27	MoReg 393.....	27	MoReg 410
<b>DEPARTMENT OF INSURANCE</b>					
20 CSR	Medical Malpractice.....			25	MoReg 597
				26	MoReg 599
				27	MoReg 415
	Sovereign Immunity Limits.....			25	MoReg 724
				26	MoReg 75
				27	MoReg 41
20 CSR 500-6.700	Property and Casualty.....		27	MoReg 1032	
20 CSR 500-6.960	Property and Casualty.....	27	MoReg 848R.....	27	MoReg 905R
		27	MoReg 849.....	27	MoReg 906

## Emergency Rules in Effect as of July 15, 2002

**Expires**

### Office of Administration

#### Commissioner of Administration

1 CSR 10-11.010 State of Missouri Travel Regulations . . . . .February 27, 2003

#### Personnel Advisory Board and Division of Personnel

1 CSR 20-5.020 Leaves of Absence . . . . .November 27, 2002

### Department of Agriculture

#### Animal Health

2 CSR 30-2.011 Prohibiting Movement of Elk, White-Tailed Deer and Mule Deer . . . . .October 27, 2002

#### Plant Industries

2 CSR 70-13.045 Registration of Apiaries . . . . .January 30, 2003

2 CSR 70-13.050 Cotton/Bee Protection Area . . . . .January 30, 2003

#### Weights and Measures

2 CSR 90-10.040 NFPA Manual No. 58 Storage and Handling of Liquefied Petroleum Gases . . . . .December 30, 2002

### Department of Conservation

#### Conservation Commission

3 CSR 10-9.353 Privileges for Class I and Class II Wildlife Breeders . . . . .September 16, 2002

3 CSR 10-9.565 Licensed Hunting Preserve: Privileges . . . . .September 16, 2002

3 CSR 10-9.566 Licensed Hunting Preserve: Records Required . . . . .September 16, 2002

### Department of Economic Development

#### Missouri Dental Board

4 CSR 110-2.131 Definition of a Public Health Setting . . . . .September 20, 2002

### Department of Labor and Industrial Relations

#### Division of Employment Security

8 CSR 10-4.180 Coverage of Indian Tribes . . . . .December 27, 2002

### Department of Mental Health

#### Director, Department of Mental Health

9 CSR 10-5.200 Report of Complaints of Abuse, Neglect and Misuse of Funds/Property . . . . .October 28, 2002

#### Division of Mental Retardation and Developmental Disabilities

9 CSR 45-5.060 Procedures to Obtain Certification . . . . .August 27, 2002

### Department of Public Safety

#### Office of the Director

11 CSR 30-7.010 Motor Vehicle Window Tinting Permits . . . . .August 30, 2002

### Department of Revenue

#### Director of Revenue

12 CSR 10-24.190 Drivers License Retesting Requirements After a License, School Bus Permit or  
Temporary Instruction Permit Expires . . . . .October 10, 2002

12 CSR 10-24.326 Third Party Tester and Examiner Sanction and Hearing Guidelines . . . . .October 26, 2002

### Department of Social Services

#### Division of Family Services

13 CSR 40-2.140 Limitations on Amount of Cash Payments . . . . .December 27, 2002

13 CSR 40-2.375 Medical Assistance for Families . . . . .December 27, 2002

13 CSR 40-30.020 Attorney Fees and Guardian *Ad Litem* Fees in Termination of Parental Rights Cases . . . . .August 22, 2002

13 CSR 40-30.030 Attorney Fees and Guardian *Ad Litem* Fees in Subsidized Adoption  
and Guardianship Cases . . . . .December 20, 2002

#### Division of Medical Services

13 CSR 70-4.090 Uninsured Parents' Health Insurance Program . . . . .December 27, 2002

13 CSR 70-15.010 Inpatient Hospital Services Reimbursement Plan; Outpatient Hospital Services  
Reimbursement Methodology . . . . .December 2, 2002

13 CSR 70-15.040 Inpatient Hospital and Outpatient Hospital Settlements . . . . .February 27, 2003

13 CSR 70-15.110 Federal Reimbursement Allowance (FRA) . . . . .December 2, 2002

13 CSR 70-15.160 Prospective Outpatient Hospital Services Reimbursement Methodology . . . . .February 27, 2003



<b>13 CSR 70-15.170</b>	Enhanced Disproportionate Share Payment to Trauma Hospitals for the Cost of Care to the Uninsured Provided by Physicians Not Employed by the Hospital . . . . .	February 27, 2003
<b>13 CSR 70-20.031</b>	List of Excludable Drugs for Which Prior Authorization is Required . . . . .	December 27, 2002
<b>13 CSR 70-20.032</b>	List of Drugs Excluded From Coverage Under the Missouri Medicaid Pharmacy Program . . . . .	December 27, 2002
<b>13 CSR 70 20.034</b>	List of Non-Excludable Drugs for Which Prior Authorization is Required . . . . .	December 27, 2002
<b>13 CSR 70-20.200</b>	Drug Prior Authorization Process . . . . .	November 27, 2002
<b>13 CSR 70-20.250</b>	Prior Authorization of New Drug Entities or New Drug Dosage Form . . . . .	November 27, 2002
<b>13 CSR 70-20.320</b>	Pharmacy Reimbursement Allowance . . . . .	February 27, 2003
<b>13 CSR 70-35.010</b>	Dental Benefits and Limitations, Medicaid Program . . . . .	February 27, 2003
<b>13 CSR 70-40.010</b>	Optical Care Benefits and Limitations—Medicaid Program . . . . .	February 27, 2003

## **Department of Health and Senior Services**

### **Office of the Director**

<b>19 CSR 10-4.040</b>	Definition of a Public Health Setting . . . . .	September 20, 2002
------------------------	---	--------------------

### **Division of Environmental Health and Communicable Disease Prevention**

<b>19 CSR 20-20.040</b>	Measures for the Control of Communicable, Environmental and Occupational Diseases . . . . .	December 28, 2002
<b>19 CSR 20-26.050</b>	Preventing Transmission of Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV) from Health Care Workers to Patients . . . . .	December 28, 2002
<b>19 CSR 20-26.060</b>	Voluntary Evaluation for the Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV)—Infected Health Care Professionals Who Perform Invasive Procedures . . . .	December 28, 2002

### **Division of Administration**

<b>19 CSR 25-38.020</b>	Laboratory Fee for Tuberculosis Testing . . . . .	August 24, 2002
-------------------------	---	-----------------

### **Missouri Senior Rx Program**

<b>19 CSR 90-1.010</b>	Definitions . . . . .	August 27, 2002
<b>19 CSR 90-1.020</b>	Eligibility and Application Process . . . . .	August 27, 2002
<b>19 CSR 90-1.030</b>	General Payment Provisions . . . . .	August 27, 2002
<b>19 CSR 90-1.040</b>	Claimant's Responsibilities . . . . .	August 27, 2002
<b>19 CSR 90-1.050</b>	Process for Reenrollment into the Program . . . . .	August 27, 2002
<b>19 CSR 90-1.060</b>	Authorized Agent . . . . .	August 27, 2002
<b>19 CSR 90-1.070</b>	Program Identification Card . . . . .	August 27, 2002
<b>19 CSR 90-1.080</b>	Termination from the Program . . . . .	August 27, 2002
<b>19 CSR 90-1.090</b>	Appeal Process . . . . .	August 27, 2002
<b>19 CSR 90-2.010</b>	Definitions . . . . .	August 27, 2002
<b>19 CSR 90-2.020</b>	Eligibility and Application Process . . . . .	August 27, 2002
<b>19 CSR 90-2.030</b>	Responsibilities of Enrolled Participating Pharmacies . . . . .	August 27, 2002
<b>19 CSR 90-2.040</b>	Termination of Suspension from the Program . . . . .	August 27, 2002
<b>19 CSR 90-2.050</b>	Appeal Process . . . . .	August 27, 2002
<b>19 CSR 90-3.010</b>	Manufacturers Rebate Program . . . . .	August 27, 2002

## **Department of Insurance**

### **Property and Casualty**

<b>20 CSR 500-6.960</b>	Plan of Operation for the Workers' Compensation Residual Market . . . . .	February 6, 2003
<b>20 CSR 500-6.960</b>	Plan of Operation for the Workers' Compensation Residual Market . . . . .	February 18, 2003

The rule number and the MoReg publication date follow each entry to this index.

## ABOVEGROUND STORAGE TANKS

applicability, definitions; 10 CSR 20-15.010; 10/15/01, 4/1/02  
release reporting; 10 CSR 20-15.020; 10/15/01, 4/1/02  
site characterization, corrective action; 10 CSR 20-15.030;  
10/15/01, 4/1/02

## ACCOUNTANCY

exam; 4 CSR 10-2.041; 12/17/01, 5/15/02  
fees; 4 CSR 10-2.160; 8/1/01, 12/17/01, 5/15/02  
license; 4 CSR 10-2.022; 12/17/01, 5/15/02  
permit; 4 CSR 10-2.061; 12/17/01, 5/15/02

## ADMINISTRATIVE HEARING COMMISSION

answers, other responsive pleadings; 1 CSR 15-2.380,  
1 CSR 15-3.380; 7/1/02  
bench rulings; 1 CSR 15-2.530; 7/1/02  
closing of case records, hearings; 1 CSR 15-2.410, 1 CSR 15-  
3.410; 7/1/02  
complaints; 1 CSR 15-2.350, 1 CSR 15-3.350; 7/1/02  
computation of time; 1 CSR 15-2.230; 7/1/02  
definitions; 1 CSR 15-2.210, 1 CSR 15-3.210; 7/1/02  
determination of cases without hearing; 1 CSR 15-2.450,  
1 CSR 15-3.450; 7/1/02  
discovery; 1 CSR 15-2.420, 1 CSR 15-3.420; 7/1/02  
dismissal; 1 CSR 15-2.430, 1 CSR 15-3.430; 7/1/02  
disposing of a case without a hearing; 1 CSR 15-3.440; 7/1/02  
fees, expenses; 1 CSR 15-2.560; 7/1/02  
filing of documents; 1 CSR 15-2.290; 7/1/02  
hearings  
    complaints; 1 CSR 15-2.490, 1 CSR 15-3.490; 7/1/02  
    motions; 1 CSR 15-2.480; 7/1/02  
intervention; 1 CSR 15-2.390, 1 CSR 15-3.390; 7/1/02  
practice by attorney; 1 CSR 15-2.250, 1 CSR 15-3.250; 7/1/02  
prehearing conference; 1 CSR 15-2.470; 7/1/02  
    with mediation; 1 CSR 15-3.470; 7/1/02  
records, certification; 1 CSR 15-2.580, 1 CSR 15-3.580; 7/1/02  
sanctions; 1 CSR 15-3.425; 7/1/02  
service of filings; 1 CSR 15-2.270; 7/1/02  
stays or suspension; 1 CSR 15-2.320, 1 CSR 15-3.320; 7/1/02  
subject matter; 1 CSR 15-2.200, 1 CSR 15-3.200; 7/1/02  
transcripts; 1 CSR 15-2.510; 7/1/02

## AIR QUALITY, POLLUTION

compliance monitoring usage; 10 CSR 10-6.280; 8/15/01,  
2/1/02  
construction permits; 10 CSR 10-6.060; 10/15/01, 4/15/02  
emissions  
    data, fees, process information; 10 CSR 10-6.110; 2/15/02,  
    7/15/02  
    episodes of high air pollution potential; 10 CSR 10-6.130;  
    4/15/02  
    fuel burning equipment; 10 CSR 10-3.060, 10 CSR 10-  
    4.040; 5/1/02  
    hazardous air pollutants; 10 CSR 10-6.080; 3/1/02  
    internal combustion engines; 10 CSR 10-2.080, 10 CSR 10-  
    5.180; 4/1/02  
    motor vehicle inspection; 10 CSR 10-5.380; 6/17/02  
    perchloroethylene dry cleaning; 10 CSR 10-2.280,  
    10 CSR 10-5.320; 7/1/02  
    restrictions, visible air contaminants; 10 CSR 10-6.220;  
    4/1/02  
    solvent metal cleaning; 10 CSR 10-5.300; 10/15/01,  
    4/15/02  
gasoline Reid vapor pressure; 10 CSR 10-5.443; 5/15/02

incinerators, waiver; 10 CSR 10-5.375; 3/15/01  
maximum achievable control technology; 10 CSR 10-6.075;  
3/1/02  
new source performance operations; 10 CSR 10-6.070; 3/1/02  
operating permits; 10 CSR 10-6.065; 10/15/01, 4/15/02  
petroleum storage, loading, transfer; 10 CSR 10-2.260; 5/1/02  
sales tax exemption; 10 CSR 10-6.320; 7/1/02

## ANIMAL HEALTH

admission; 2 CSR 30-2.010; 12/3/01, 5/1/02, 6/17/02  
duties, facilities of the market/sale veterinarian; 2 CSR 30-6.020;  
12/3/01, 5/1/02, 6/17/02  
exhibition; 2 CSR 30-2.040; 12/3/01, 5/1/02, 6/17/02  
movement of livestock; 2 CSR 30-2.020; 6/17/02  
prohibiting movement of elk, deer; 2 CSR 30-2.011; 6/3/02

## APPRAISERS, REAL ESTATE

application; 4 CSR 245-5.020; 5/15/01, 9/4/01  
payment; 4 CSR 245-5.010; 5/15/01, 9/4/01

## ARCHITECTS, PROFESSIONAL ENGINEERS, PROFESSIONAL LAND SURVEYORS

architects  
    seals; 4 CSR 30-3.020; 11/1/01, 3/15/02  
engineers  
    continuing professional competency; 4 CSR 30-11.015;  
    12/3/01, 5/1/02  
    reexaminations; 4 CSR 30-5.105; 12/3/01, 5/1/02  
seals; 4 CSR 30-3.030; 11/1/01, 3/15/02  
land surveyors  
    admission to examination; 4 CSR 30-5.110; 12/3/01, 5/1/02  
    evaluation; 4 CSR 30-4.080; 11/1/01, 3/15/02  
    examination; 4 CSR 30-5.120; 11/1/01, 3/15/02  
    reexamination; 4 CSR 30-5.130; 11/1/01, 3/15/02  
    seals; 4 CSR 30-3.040; 11/1/01, 3/15/02

## ATHLETICS, BOARD OF

amateur boxing; 4 CSR 40-5.050; 12/17/01, 4/15/02  
announcers; 4 CSR 40-4.060; 12/17/01, 4/15/02  
boxing rules; 4 CSR 40-5.040; 12/17/01, 4/15/02  
contestants; 4 CSR 40-4.090; 12/17/01, 4/15/02  
custodian of public records; 4 CSR 40-1.030; 12/17/01, 4/15/02  
definitions; 4 CSR 40-1.021; 12/17/01, 4/15/02  
disciplinary, appeal procedures; 4 CSR 40-7.010; 12/17/01,  
4/15/02  
elimination contest; 4 CSR 40-5.070; 12/17/01, 4/15/02  
facility, equipment; 4 CSR 40-6.010; 12/17/01, 4/15/02  
fees, document search; 4 CSR 40-1.031; 12/17/01, 4/15/02  
full-contact karate, kickboxing; 4 CSR 40-5.060; 12/17/01,  
4/15/02  
inspectors; 4 CSR 40-5.010; 12/17/01, 4/15/02  
judges; 4 CSR 40-4.080; 12/17/01, 4/15/02  
licenses; 4 CSR 40-2.011; 12/17/01, 4/15/02  
matchmakers; 4 CSR 40-4.020; 12/17/01, 4/15/02  
organization; 4 CSR 40-1.010; 12/17/01, 4/15/02  
permits; 4 CSR 40-2.021; 12/17/01, 4/15/02  
physicians; 4 CSR 40-4.040; 12/17/01, 4/15/02  
promoters; 4 CSR 40-4.015; 12/17/01, 4/15/02  
referees; 4 CSR 40-4.030; 12/17/01, 4/15/02  
seconds; 4 CSR 40-4.070; 12/17/01, 4/15/02  
tickets and taxes; 4 CSR 40-3.011; 12/17/01, 4/15/02  
timekeepers; 4 CSR 40-4.050; 12/17/01, 4/15/02  
wrestling rules; 4 CSR 40-5.030; 12/17/01, 4/15/02

**ATHLETIC TRAINERS, REGISTRATION OF**  
fees; 4 CSR 150-6.050; 6/3/02

**ATTORNEY GENERAL, OFFICE OF THE**  
no-call database  
access; 15 CSR 60-13.060; 10/15/01, 2/1/02

**BINGO**

games; 11 CSR 45-5.290; 1/16/02, 5/1/02  
price reporting; 11 CSR 45-30.570; 7/1/02  
promotions; 11 CSR 45-30.025; 12/3/01, 4/1/02  
pull-tab cards; 11 CSR 45-30.355; 3/1/02, 7/1/02

**BOLL WEEVIL ERADICATION**

apiaries, registration; 2 CSR 70-13.045; 5/15/02  
cotton/bee protection area; 2 CSR 70-13.050; 5/15/02

**CEMETERIES, ENDOWED CARE**

application; 4 CSR 65-2.010; 11/1/01, 2/15/02  
fees; 4 CSR 65-1.060; 11/1/01, 2/15/02  
license renewal; 4 CSR 65-2.050; 11/1/01, 2/15/02

**CERTIFICATE OF NEED PROGRAM**

administration; 19 CSR 60-50.900; 1/16/02, 5/1/02  
application  
package; 19 CSR 60-50.430; 1/16/02, 5/1/02  
process; 19 CSR 60-50.420; 1/16/02, 5/1/02  
criteria and standards  
alternatives; 19 CSR 60-50.480; 1/16/02, 5/1/02  
equipment; 19 CSR 60-50.440; 1/16/02, 5/1/02  
financial feasibility; 19 CSR 60-50.470; 1/16/02, 5/1/02  
hospital, freestanding health services; 19 CSR 60-50.440;  
1/16/02, 5/1/02  
long-term care; 19 CSR 60-50.450; 1/16/02, 5/1/02  
other health services, emerging technology; 19 CSR 60-  
50.460; 1/16/02, 5/1/02  
decisions; 19 CSR 60-50.600; 1/16/02, 5/1/02  
post-decision activity; 19 CSR 60-50.700; 1/16/02, 5/1/02  
definitions; 19 CSR 60-50.300; 1/16/02, 5/1/02  
health service guidelines; 19 CSR 60-50.310; 1/16/02, 5/1/02  
information, additional; 19 CSR 60-50.500; 1/16/02, 5/1/02  
letter of intent  
package; 19 CSR 60-50.410; 1/16/02, 5/1/02  
process; 19 CSR 60-50.400; 1/16/02, 5/1/02  
meeting procedures; 19 CSR 60-50.800; 1/16/02, 5/1/02  
purpose and structure; 19 CSR 60-50.200; 1/16/02, 5/1/02  
review process; 19 CSR 60-50.420; 1/16/02, 5/1/02

**CHILD CARE**

foster child, educational plan; 13 CSR 40-60.050; 2/15/02,  
6/17/02

**CIVIL RIGHTS COMPLIANCE**

requirements; 19 CSR 10-2.010; 5/15/02

**CLEAN WATER COMMISSION**

40% construction grant; 10 CSR 20-4.023; 4/16/01  
groundwater remediation; 10 CSR 20-7.040; 2/1/02  
hardship grants; 10 CSR 20-4.043; 4/16/01  
storm water regulations; 10 CSR 20-6.200; 10/15/01, 4/15/02

**CONSERVATION COMMISSION**

area closings; 3 CSR 10-11.115; 6/17/02  
boats and motors; 3 CSR 10-11.160, 3 CSR 10-12.110; 6/17/02  
bullfrogs and green frogs; 3 CSR 10-11.165; 6/17/02  
camping; 3 CSR 10-11.140; 6/17/02  
commercial establishments; 3 CSR 10-10.743; 6/17/02  
decoys and blinds; 3 CSR 10-11.155; 6/17/02

deer; 3 CSR 10-7.435; 6/17/02  
hunting; 3 CSR 10-11.182; 6/17/02, 7/15/02  
managed hunts; 3 CSR 10-11.183; 6/17/02  
definitions; 3 CSR 10-20.805; 6/17/02  
endangered species; 3 CSR 10-4.111; 2/1/02, 4/15/02  
filed trials; 3 CSR 10-11.125; 6/17/02  
fishermen, commercial; 3 CSR 10-10.727; 6/17/02  
fishing  
commercial; 3 CSR 10-10.725; 6/17/02  
daily and possession limits; 3 CSR 10-12.140; 6/17/02  
hours and methods; 3 CSR 10-11.205; 6/17/02  
length limits; 3 CSR 10-12.145, 3 CSR 10-11.215; 6/17/02  
limits; 3 CSR 10-11.210; 6/17/02  
methods; 3 CSR 10-6.410, 3 CSR 10-12.135; 6/17/02  
furbearers; 3 CSR 10-8.515; 6/17/02  
hound running area; 3 CSR 10-9.575; 6/17/02  
hunting and trapping; 3 CSR 10-12.125; 6/17/02  
hunting methods; 3 CSR 10-7.410; 6/17/02  
hunting preserve  
privileges; 3 CSR 10-9.565; 4/1/02  
records required; 3 CSR 10-9.566; 4/1/02, 6/17/02  
live bait; 3 CSR 10-6.605; 6/17/02  
other fish; 3 CSR 10-6.550; 6/17/02  
owner may protect property; 3 CSR 10-4.130; 6/17/02  
permits and privileges; 3 CSR 10-5.215; 6/17/02  
confined wildlife; 3 CSR 10-9.630; 6/17/02  
exemptions; 3 CSR 10-5.205; 6/17/02  
deer hunting; 3 CSR 10-5.350; 6/17/02  
first bonus; 3 CSR 10-5.352; 6/17/02  
second bonus; 3 CSR 10-5.353; 6/17/02  
field trials; 3 CSR 10-9.625; 6/17/02  
fishing, daily; 3 CSR 10-5.440; 7/15/02  
hound running area operators; 3 CSR 10-9.570; 6/17/02  
hunting preserve; 3 CSR 10-5.460, 3 CSR 10-9.560;  
6/17/02  
3 day license; 3 CSR 10-5.465; 6/17/02  
issuing agents; 3 CSR 10-5.225; 6/17/02  
nonresident firearms deer; 3 CSR 10-5.550; 6/17/02  
any-deer hunting; 3 CSR 10-5.551; 10/1/01, 2/1/02,  
3/15/02, 6/3/02, 6/17/02  
first bonus; 3 CSR 10-5.552; 6/17/02  
hunting; 3 CSR 10-5.550; 10/1/01, 2/1/02, 3/15/02,  
6/3/02  
landowner; 3 CSR 10-5.575; 6/17/02  
any-deer; 3 CSR 10-5.576; 6/17/02  
first bonus; 3 CSR 10-5.577; 6/17/02  
second bonus; 3 CSR 10-5.578; 6/17/02  
managed deer hunt; 3 CSR 10-5.559; 10/1/01, 2/1/02,  
6/17/02  
second bonus; 3 CSR 10-5.553; 6/17/02  
resident  
any-deer hunting; 3 CSR 10-5.351; 7/15/02  
archer's deer hunting; 3 CSR 10-5.360; 7/15/02  
fishing; 3 CSR 10-5.340; 7/15/02  
managed deer hunting; 3 CSR 10-5.359; 7/15/02  
small game hunting; 3 CSR 10-5.345; 7/15/02  
daily; 3 CSR 10-5.445; 7/15/02  
turkey hunting; 3 CSR 10-5.365; 7/15/02  
turkey archers; 3 CSR 10-5.560; 10/1/01, 2/1/02  
antlerless-only; 3 CSR 10-5.425; 6/17/02  
nonresident; 3 CSR 10-5.565; 10/1/01, 2/1/02, 6/17/02  
trout fishing area; 3 CSR 10-9.645; 6/17/02  
wildlife; 3 CSR 10-9.106; 6/17/02  
collectors; 3 CSR 10-9.425; 6/17/02  
youth deer and turkey hunting; 3 CSR 10-5.420; 7/15/02  
prohibitions, general; 3 CSR 10-9.110; 6/17/02  
provisions; 3 CSR 10-6.405; 11/1/01, 2/1/02, 6/17/02  
general; 3 CSR 10-11.110; 6/17/02

restricted zones; 3 CSR 10-6.415; 6/17/02  
 right to possess wildlife; 3 CSR 10-4.141; 6/17/02  
 seasons, hunting; 3 CSR 10-11.180; 6/17/02  
 target shooting, shooting ranges; 3 CSR 10-11.150; 7/15/02  
 traps, use of; 3 CSR 10-8.510; 6/17/02  
 tree stands; 3 CSR 10-11.145; 6/17/02  
 turkey season; 3 CSR 10-7.455; 2/1/02, 6/17/02  
 walleye and sauger; 3 CSR 10-6.540; 6/17/02  
 waterfowl hunting; 3 CSR 10-11.186; 6/17/02  
 wildlife  
     breeders; 3 CSR 10-9.353; 4/1/02, 6/17/02  
     records required; 3 CSR 10-9.359; 6/17/02  
     Class II; 3 CSR 10-9.351; 6/17/02  
     confinement standards; 3 CSR 10-9.220; 6/17/02  
 privileges; 3 CSR 10-9.353; 6/17/02

### **COSMETOLOGY, STATE BOARD OF**

change of mailing address; 4 CSR 90-13.070; 1/2/02, 5/1/02  
 esthetic schools; 4 CSR 90-2.030; 1/2/02, 5/1/02  
 hours; 4 CSR 90-8.010; 1/2/02, 5/1/02  
 instructor license; 4 CSR 90-12.080; 1/2/02, 5/1/02  
 manicuring schools; 4 CSR 90-2.020; 1/2/02, 5/1/02  
 practice outside, away from beauty shop; 4 CSR 90-4.020;  
     1/2/02, 5/1/02  
 schools; 4 CSR 90-2.010; 1/2/02, 5/1/02

### **CREDIT UNIONS**

service organization; 4 CSR 100-2.085; 1/2/02, 4/15/02

### **DEAF, MISSOURI COMMISSION FOR THE**

appeal rights; 5 CSR 100-200.180; 9/4/01, 2/1/02  
 application; 5 CSR 100-200.050; 9/4/01, 2/1/02  
 certification  
     maintenance; 5 CSR 100-200.130; 9/4/01, 2/1/02  
     renewal; 5 CSR 100-200.125; 9/4/01, 2/1/02  
     restricted; 5 CSR 100-200.040; 9/4/01, 2/1/02  
     validation; 5 CSR 100-200.120; 9/4/01, 2/1/02  
 conversion procedure; 5 CSR 100-200.100; 9/4/01, 2/1/02  
 enforcement; 5 CSR 100-200.200; 9/4/01, 2/1/02  
 evaluation; 5 CSR 100-200.070; 9/4/01, 2/1/02  
     performance; 5 CSR 100-200.080; 9/4/01, 2/1/02  
 examination, written; 5 CSR 100-200.060; 9/4/01, 2/1/02  
 fees; 5 CSR 100-200.150; 9/4/01, 2/1/02  
 grandfather clause; 5 CSR 100-200.110; 9/4/01, 2/1/02  
 grievance procedure; 5 CSR 100-200.180; 9/4/01, 2/1/02  
 interpreter certification system; 5 CSR 100-200.030; 9/4/01,  
     2/1/02  
 mentorship; 5 CSR 100-200.175; 9/4/01, 2/1/02  
 name and address change; 5 CSR 100-200.140; 9/4/01, 2/1/02  
 organization; 5 CSR 100-200.010; 9/4/01, 2/1/02  
 permit  
     intern/practicum eligibility; 5 CSR 100-200.085; 9/4/01,  
     2/1/02  
     restricted; 5 CSR 100-200.040; 9/4/01, 2/1/02  
     temporary; 5 CSR 100-200.090; 9/4/01, 2/1/02  
 recertification, voluntary; 5 CSR 100-200.075; 9/4/01, 2/1/02  
 reinstatement; 5 CSR 100-200.210; 9/4/01, 2/1/02  
 skill level standards; 5 CSR 100-200.170; 9/4/01, 2/1/02  
 test, written; 5 CSR 100-200.060; 9/4/01, 2/1/02

### **DENTAL BOARD, MISSOURI**

continuing dental education; 4 CSR 110-2.240; 1/16/02, 5/1/02  
 equipment; 4 CSR 110-2.132; 4/1/02, 7/15/02  
 fees; 4 CSR 110-2.170; 1/16/02, 5/1/02  
 public health setting; 4 CSR 110-2.131; 4/1/02, 7/15/02

### **DISEASES**

measures for control of; 19 CSR 20-20.040; 7/15/02  
 metabolic, genetic testing; 19 CSR 25-36.010; 5/15/02

sexually transmitted diseases  
     preventing transmission of HIV, HBV; 19 CSR 20-  
     26.050; 6/17/02  
     voluntary evaluation for health care professionals; 19 CSR  
     20-26.060; 6/17/02

### **DRINKING WATER PROGRAM, PUBLIC**

contaminant levels  
     filter backwash recycling; 10 CSR 60-4.050; 2/15/02  
     radionuclide level; 10 CSR 60-4.060; 2/15/02  
 lead and copper  
     corrosion control  
         requirements; 10 CSR 60-15.030; 9/17/01, 3/15/02  
         treatment; 10 CSR 60-15.020; 9/17/01, 3/15/02  
     monitoring; 10 CSR 60-7.020; 9/17/01, 3/15/02  
     source water; 10 CSR 60-15.090; 9/17/01, 3/15/02  
     supplemental; 10 CSR 60-15.060; 9/17/01, 3/15/02  
     tap water; 10 CSR 60-15.070; 9/17/01, 3/15/02  
 water quality parameters; 10 CSR 60-15.080; 9/17/01,  
     3/15/02  
     prohibition; 10 CSR 60-10.040; 9/17/01, 3/15/02  
     public education; 10 CSR 60-15.060; 9/17/01, 3/15/02  
     service line replacement; 10 CSR 60-15.050; 9/17/01,  
     3/15/02

### **DRIVERS LICENSE BUREAU RULES**

deletion of violations; 12 CSR 10-24.050; 11/1/01, 2/15/02  
 instruction permits; 12 CSR 10-24.402; 11/1/01, 2/15/02  
 J88 notation, deaf, hard of hearing; 12 CSR 10-24.470;  
     12/17/01, 4/1/02  
 prohibit release of information; 12 CSR 10-24.462; 11/1/01,  
     2/15/02  
 retesting requirements; 12 CSR 10-24.190; 11/1/01, 2/15/02,  
     5/15/02  
 third party tester; 12 CSR 10-24.326; 11/1/01, 3/15/02, 5/15/02  
 written examination; 12 CSR 10-24.300; 11/1/01, 2/15/02

### **ELEMENTARY AND SECONDARY EDUCATION**

academically deficient schools; 5 CSR 50-340.110; 11/1/01,  
     4/1/02, 5/1/02  
 calculation of previous per eligible pupil; 5 CSR 30-660.050;  
     12/3/01, 4/1/02  
 certificate to teach  
     assessments required; 5 CSR 80-800.380; 4/1/02  
     classifications; 5 CSR 80-800.360; 12/3/01, 5/1/02  
 cost of education index; 5 CSR 30-660.030; 12/3/01, 4/1/02  
 districts, school  
     annual public reporting; 5 CSR 30-4.040; 5 CSR 50-  
     340.200; 12/3/01, 4/1/02  
     collection of reports; 5 CSR 30-4.045; 12/3/01, 4/1/02  
 innovative or alternative programs; 5 CSR 80-805.030; 12/3/01,  
     5/1/02  
 library media centers; 5 CSR 50-340.030; 5/1/02  
 salaries, minimum; 5 CSR 30-660.040; 12/3/01, 4/1/02  
 scholarship, teacher education; 5 CSR 80-850.010; 5/1/02  
 summer school; 5 CSR 50-340.050; 4/1/02, 7/1/02  
 vocational-technical education enhancement grant; 5 CSR 60-  
     120.070; 11/1/01, 4/1/02

### **EMBALMERS AND FUNERAL DIRECTORS**

funeral directing; 4 CSR 120-2.060; 12/3/01, 3/15/02  
 funeral establishments; 4 CSR 120-2.070; 12/3/01, 3/15/02  
 license renewal; 4 CSR 120-2.020; 12/3/01, 3/15/02  
 licensure by reciprocity; 4 CSR 120-2.040; 12/3/01, 3/15/02  
 miscellaneous rules; 4 CSR 120-2.050; 12/3/01, 3/15/02  
 organization; 4 CSR 120-1.010; 12/3/01, 3/15/02  
 public records; 4 CSR 120-2.120; 12/3/01, 3/15/02  
 registration, apprenticeship; 4 CSR 120-2.010; 12/3/01, 3/15/02  
 vital statistics, registration; 4 CSR 120-2.030; 12/3/01, 3/15/02

**EMERGENCY MANAGEMENT AGENCY, STATE**

definitions; 11 CSR 10-11.220; 2/1/02, 5/15/02  
EPCRA reporting procedures; 11 CSR 10-11.240; 2/1/02, 5/15/02  
fees, hazardous chemicals; 11 CSR 10-11.250; 2/1/02, 5/15/02  
notification, releases of substances; 11 CSR 10-11.230; 2/1/02, 5/15/02  
organization; 11 CSR 10-11.210; 2/1/02, 5/15/02

**EMPLOYMENT SECURITY**

appeals; 8 CSR 10-5.010; 5/15/02  
decisions; 8 CSR 10-5.050; 5/15/02  
hearings; 8 CSR 10-5.015; 5/15/02  
orders of appeal; 8 CSR 10-5.040; 5/15/02  
telephone hearings; 8 CSR 10-5.030; 5/15/02

**ENERGY ASSISTANCE**

low energy assistance program; 13 CSR 40-19.020; 1/15/01, 3/15/02

**ETHICS COMMISSION**

fee, late; 1 CSR 50-3.010; 11/15/01, 3/1/02

**FINANCE, DIVISION OF**

accounting, other real estate; 4 CSR 140-2.070; 3/15/02, 7/1/02  
bank holding companies  
    licensing; 4 CSR 140-10.030; 3/15/02, 7/1/02  
    regional interstate; 4 CSR 140-10.010; 3/15/02, 7/1/02  
corporations, community development; 4 CSR 140-2.067; 3/15/02, 7/1/02  
loan companies, small  
    licensing; 4 CSR 140-11.010; 3/15/02  
    record keeping; 4 CSR 140-11.020; 3/15/02  
organization; 4 CSR 140-1.010; 3/15/02, 7/1/02  
sale of checks; 4 CSR 140-12.010; 3/15/02, 7/1/02  
section 408.510 companies  
    licensing; 4 CSR 140-13.010; 3/15/02, 7/1/02  
section 500 companies  
    licensing; 4 CSR 140-11.030; 3/15/02  
    record keeping; 4 CSR 140-11.040; 3/15/02  
title loan companies  
    licensing; 4 CSR 140-29.010; 3/15/02, 7/1/02

**GAMING COMMISSION**

application, class A; 11 CSR 45-4.030; 12/3/01, 4/15/02  
cards, specifications; 11 CSR 45-5.183; 7/1/02  
definitions; 11 CSR 45-1.090; 1/16/02, 5/1/02  
identification badge; 11 CSR 45-4.410; 1/16/02, 5/1/02  
liquor control; 11 CSR 45-12.090; 1/16/02, 5/1/02  
minimum internal control standards; 11 CSR 45-9.030; 4/1/02  
occupational license; 11 CSR 45-4.260; 12/3/01, 3/1/02; 4/15/02, 7/1/02; 11 CSR 45-4.420; 1/16/02, 5/1/02  
    levels; 11 CSR 45-4.400; 1/16/02, 5/1/02  
payout percentage  
    gaming devices; 11 CSR 45-5.070; 4/1/02  
    progressive table games; 11 CSR 45-5.075; 4/1/02  
record keeping  
    manufacturer; 11 CSR 45-30.395; 11/1/01, 4/15/02  
    suppliers; 11 CSR 45-30.525; 11/1/01, 4/15/02  
records; 11 CSR 45-3.010; 6/3/02  
reports; 11 CSR 45-8.050; 1/16/02, 5/1/02  
riverboat safety  
    inspections; 11 CSR 45-6.025; 1/16/02, 6/3/02  
    standards; 11 CSR 45-6.020; 1/16/02, 6/3/02  
rules of play; 11 CSR 45-30.190; 11/1/01, 4/15/02  
supplier's license; 11 CSR 45-4.200; 12/3/01, 4/15/02  
    affiliate; 11 CSR 45-4.205; 12/3/01, 4/15/02  
transmittal of record; 11 CSR 45-13.070; 1/16/02, 5/1/02

**GEOLOGIST REGISTRATION, MISSOURI BOARD OF**  
fees; 4 CSR 145-1.040; 5/15/01, 9/4/01, 12/3/01, 3/15/02

**HAZARDOUS WASTE PROGRAM**

definitions; 10 CSR 25-3.260; 1/16/02, 7/1/02  
fees and taxes; 10 CSR 25-12.010; 1/16/02, 5/1/02, 7/1/02  
transporters, standards; 10 CSR 25-6.263; 1/16/02, 7/1/02

**HEALTH CARE**

healthy communities incentive program; 19 CSR 10-4.050; 3/15/02, 7/1/02  
PRIMO program; 19 CSR 10-4.010; 3/15/02, 7/15/02  
public health setting; 19 CSR 10-4.040; 4/1/02, 7/15/02

**HEALTH CARE PLAN, MISSOURI CONSOLIDATED**

benefit provision, covered charges; 22 CSR 10-2.055; 1/16/02, 5/1/02  
definitions; 22 CSR 10-2.010; 1/16/02, 5/1/02  
HMO and POS limitations; 22 CSR 10-2.067; 1/16/02, 5/1/02  
review and appeals procedures; 22 CSR 10-2.075; 1/16/02, 5/1/02  
summary of medical benefits  
    co-pay plan; 22 CSR 10-2.045; 1/16/02, 5/1/02  
    HMO/POS premium option; 22 CSR 10-2.063; 1/16/02, 5/1/02  
    HMO/POS standard option; 22 CSR 10-2.064; 1/16/02, 5/1/02  
    PPO plan; 22 CSR 10-2.040; 1/16/02, 5/1/02  
    staff model; 22 CSR 10-2.065; 1/16/02, 5/1/02

**HEALTH MAINTENANCE ORGANIZATIONS**

monitoring of; 19 CSR 10-5.010; 11/1/01, 2/15/02

**HEARING INSTRUMENT SPECIALISTS**

continuing education; 4 CSR 165-2.050; 9/4/01, 2/1/02  
fees; 4 CSR 165-1.020; 9/4/01, 2/1/02  
license renewal; 4 CSR 165-2.060; 9/4/01, 2/1/02

**HIGHER EDUCATION**

proprietary schools; 6 CSR 10-5.010; 12/1/00, 3/15/01, 6/15/01  
student loan program; 6 CSR 10-2.030; 12/3/01, 3/15/02

**HIGHWAYS**

adopt-a-highway program  
    agreement; 7 CSR 10-14.040; 2/15/02, 7/15/02  
    modification, termination; 7 CSR 10-14.060; 2/15/02, 7/15/02  
    application; 7 CSR 10-14.030; 2/15/02, 7/15/02  
    definitions; 7 CSR 10-14.020; 2/15/02, 7/15/02  
    sign; 7 CSR 10-14.050; 2/15/02, 7/15/02  
technician certification program  
    appeal process; 7 CSR 10-23.030; 6/17/02  
    certification, decertification; 7 CSR 10-23.020; 6/17/02  
    definitions; 7 CSR 10-23.010; 6/17/02

**INCOME MAINTENANCE**

limitations on cash payments; 13 CSR 40-2.140; 7/15/02  
medical assistance for families; 13 CSR 40-2.375; 7/15/02

**INDIAN TRIBES**

coverage of unemployment insurance; 8 CSR 10-4.180; 7/15/02

**INSURANCE, DEPARTMENT OF**

accounting standards, principles; 20 CSR 200-1.020; 1/16/02, 5/15/02  
affiliated transactions; 20 CSR 200-11.130; 1/16/02, 5/15/02  
licensing requirements; 20 CSR 200-6.600; 10/15/01, 2/1/02  
life insurance policies; 20 CSR 200-1.160; 10/15/01, 2/1/02  
medical malpractice award; 20 CSR; 3/1/00, 3/1/01, 3/1/02

privacy of financial information; 20 CSR 100-6.100; 7/16/01, 10/1/01, 2/15/02  
 referred or adopted materials; 20 CSR 10-1.020; 1/16/02, 5/15/02  
 sovereign immunity limits; 20 CSR; 3/15/00, 1/2/01, 1/2/02  
 workers compensation; 20 CSR 500-6.700; 11/1/01, 5/1/02  
   managed care organizations; 20 CSR 500-6.700; 6/17/02  
   residual market, plan of operation; 20 CSR 500-6.960; 6/3/02

**INVESTMENT**

nonstate funds; 12 CSR 10-43.030; 3/15/02, 7/1/02, 7/15/02

**LAND RECLAMATION**

industrial mineral open pit, in-stream sand and gravel operations  
   performance requirements; 10 CSR 40-10.050; 9/17/01  
   permit application; 10 CSR 40-10.020; 9/17/01, 4/15/02

**LIVESTOCK**

complaint handling; 2 CSR 10-5.015; 3/15/02, 6/17/02  
 price reporting, purchases by packers; 2 CSR 10-5.010; 7/2/01  
 public complaint handling; 2 CSR 10-5.015; 11/15/01

**MEDICAID**

critical assess hospitals; 13 CSR 70-15.010; 6/3/02, 7/1/02  
 dental program; 13 CSR 70-35.010; 7/15/02  
 excludable drugs; 13 CSR 70-20.031; 10/15/01, 4/15/02, 7/15/02  
 federal reimbursement allowance; 13 CSR 70-15.110; 2/1/02, 6/3/02, 7/1/02  
 filing of claims; 13 CSR 70-3.100; 11/1/01, 2/15/02  
 hospices services; 13 CSR 70-50.010; 10/1/01, 2/1/02  
 hospital settlements; 13 CSR 70-15.040; 7/15/02  
 nonexcludable drugs; 13 CSR 70-20.034; 10/15/01, 4/15/02, 7/15/02  
 nursing facilities; 13 CSR 70-10.110; 10/1/0, 2/1/021  
 optical care benefits; 13 CSR 70-40.010; 7/15/02  
 payment to trauma hospitals; 13 CSR 70-15.170; 7/15/02  
 prospective outpatient services; 13 CSR 70-15.160; 7/15/02  
 trend indices; 13 CSR 70-15.010; 10/1/01, 2/1/02  
 settlements; 13 CSR 70-15.040; 10/1/01, 2/1/02  
 uninsured parents' health insurance; 13 CSR 70-4.090; 7/15/02

**MENTAL HEALTH, DEPARTMENT OF**

administration; 9 CSR 30-4.032; 2/1/02, 5/15/02  
 admission criteria; 9 CSR 30-4.042; 2/1/02, 5/15/02  
 aggressive behaviors; 9 CSR 45-3.050; 4/15/02  
 alcohol and drug abuse programs  
   adolescents; 9 CSR 30-3.192; 5/15/02  
   certification; 9 CSR 30-3.032; 4/15/02  
   detoxification; 9 CSR 30-3.120; 11/15/01, 3/15/02, 5/15/02  
   methadone treatment; 9 CSR 30-3.132; 11/15/01, 3/15/02  
   opioid treatment; 9 CSR 30-3.132; 4/15/02  
   outpatient treatment; 9 CSR 30-3.130; 11/15/01, 3/15/02  
   prevention programs; 9 CSR 30-3.300; 11/15/01, 3/15/02  
   residential treatment; 9 CSR 30-3.140; 11/15/01, 3/15/02, 5/15/02  
   SATOP program structure; 9 CSR 30-3.206; 4/15/02  
 behavior management; 9 CSR 10-7.060; 5/15/02  
 certification  
   centers; 9 CSR 30-4.031; 2/1/02, 5/15/02  
   procedures; 9 CSR 45-5.060; 3/1/02, 7/15/02  
 client records; 9 CSR 30-4.035; 2/1/02; 5/15/02  
 complaints of abuse, neglect; 9 CSR 1-5.200; 4/15/02  
 definitions; 9 CSR 30-4.030; 2/1/02, 5/15/02; 9 CSR 10-7.140; 5/15/02  
 medications; 9 CSR 10-7.070; 5/15/02  
 organization; 9 CSR 10-1.010; 6/3/02  
 personnel; 9 CSR 30-4.034; 2/1/02, 5/15/02  
 protest and appeals procedures; 9 CSR 25-2.505; 1/16/02, 5/1/02

psychiatric and substance abuse programs  
   rights, responsibilities, grievances; 9 CSR 10-7.020; 1/16/02, 5/15/02  
   service delivery process; 9 CSR 10-7.030; 1/16/02, 5/15/02  
 rehabilitation, intensive; 9 CSR 30-4.045; 2/1/02, 5/15/02  
 service provision; 9 CSR 30-4.039; 2/1/02, 5/15/02  
 treatment; 9 CSR 30-4.043; 2/1/02, 5/15/02

**MILK BOARD, STATE**

fees, inspection; 2 CSR 80-5.010; 3/1/02, 6/17/02

**MOTORCYCLE SAFETY EDUCATION PROGRAM**

definitions; 11 CSR 60-1.010; 12/17/01, 5/15/02  
 quality assurance visits; 11 CSR 60-1.100; 12/17/01, 5/15/02  
 student admission; 11 CSR 60-1.040; 12/17/01, 5/15/02  
 training courses, approved; 11 CSR 60-1.060; 12/17/01, 5/15/02  
 verification, course completion; 11 CSR 60-1.050; 12/17/01, 5/15/02

**MOTOR VEHICLE**

air, vacuum brake systems; 11 CSR 50-2.170; 12/3/01, 3/15/02  
 brake performance; 11 CSR 50-2.150; 12/3/01, 3/15/02  
 nonresident disabled person windshield placard; 12 CSR 10-23.275; 11/1/01, 2/15/02  
 school bus  
   inspection; 11 CSR 50-2.320; 12/3/01, 3/15/02  
   special education buses; 11 CSR 50-2.321; 12/3/01, 3/15/02  
 tires; 11 CSR 50-2.240; 12/3/01, 3/15/02  
 window tinting; 11 CSR 30-7.010; 9/17/01, 1/2/02, 4/1/02, 7/15/02

**NURSING HOME ADMINISTRATORS**

examination; 13 CSR 73-2.070; 1/2/02, 5/1/02  
 fees; 13 CSR 73-2.015; 1/2/02, 5/1/02

**NURSING HOME PROGRAM**

pediatric care; 13 CSR 70-10.050; 12/17/01, 4/15/02

**OCCUPATIONAL THERAPY, MISSOURI BOARD OF**

application  
   assistant therapist; 4 CSR 205-3.020; 1/2/02, 5/1/02  
   therapist; 4 CSR 205-3.010; 1/2/02, 5/1/02  
 release of public records; 4 CSR 205-1.030; 1/2/02, 5/1/02

**OPTOMETRY, DIVISION OF**

fees; 4 CSR 210-2.070; 1/16/02, 5/1/02  
 license renewal; 4 CSR 210-2.030; 1/16/02, 5/1/02

**PARENTAL RIGHTS**

attorney, guardian ad litem fees; 13 CSR 40-30.030; 7/15/02  
 fees in termination cases; 13 CSR 40-30.020; 3/1/02, 6/17/02

**PEACE OFFICER STANDARDS AND TRAINING (POST) PROGRAM**

administration; 11 CSR 75-7.010; 6/3/02  
 alternative methods of training delivery  
   procedures for agencies; 11 CSR 75-12.030; 6/3/02  
 application; 11 CSR 75-4.020; 6/3/02  
 bailiffs, training  
   completion; 11 CSR 75-9.030; 6/3/02  
   requirements for; 11 CSR 75-9.010; 6/3/02  
   trainee attendance, performance; 11 CSR 75-9.020; 6/3/02  
 certification; 11 CSR 75-3.010; 6/3/02  
   bailiff, peace officer, reserve officer; 11 CSR 75-3.060; 6/3/02  
   eligibility for; 11 CSR 75-3.020; 6/3/02  
   instructors; 11 CSR 75-4.030; 6/3/02  
   requirements for; 11 CSR 75-3.030; 6/3/02

continuing education

approval for a CLEE course; 11 CSR 75-15.040; 6/3/02  
computer-based training; 11 CSR 75-15.070; 6/3/02  
in-service training; 11 CSR 75-15.060; 6/3/02  
out-of-state, federal, organization; 11 CSR 75-15.050;  
6/3/02  
provider license; 11 CSR 75-15.030; 6/3/02  
requirement; 11 CSR 75-15.010; 6/3/02  
standards; 11 CSR 75-15.020; 6/3/02

courses; 11 CSR 75-6.030; 6/3/02

decertification; 11 CSR 75-4.050; 6/3/02

definitions; 11 CSR 75-2.010; 6/3/02

education requirements, continuing

completion; 11 CSR 75-11.030; 6/3/02  
computer-based education; 11 CSR 75-12.010; 6/3/02  
inactive or unemployed; 11 CSR 75-11.050; 6/3/02  
in-service training courses; 11 CSR 75-11.080; 6/3/02  
providers  
approved; 11 CSR 75-11.060; 6/3/02  
procedures; 11 CSR 75-11.070; 6/3/02  
computer-based training alternatives; 11 CSR 75-  
12.020; 6/3/02

recognition, out-of-state training; 11 CSR 75-11.035;  
6/3/02

requirements; 11 CSR 75-11.010; 6/3/02

trainee attendance, performance; 11 CSR 75-11.020; 6/3/02

evaluation of

individual; 11 CSR 75-3.070; 6/3/02

instructors; 11 CSR 75-4.040; 6/3/02

fund, administration; 11 CSR 75-16.010; 6/3/02

applicants; 11 CSR 75-10.030; 6/3/02

budget year; 11 CSR 75-10.080; 6/3/02

cost items; 11 CSR 75-10.060; 6/3/02

ineligible; 11 CSR 75-10.070; 6/3/02

distribution; 11 CSR 75-10.100; 6/3/02

organization; 11 CSR 75-10.010; 6/3/02

terms, conditions; 11 CSR 75-10.020; 6/3/02

training

eligible; 11 CSR 75-10.040; 6/3/02

ineligible; 11 CSR 75-10.050; 6/3/02

instructors; 11 CSR 75-4.010; 6/3/02

law enforcement experience; 11 CSR 75-3.040; 6/3/02

organization; 11 CSR 75-1.010; 6/3/02

peace officer licenses

adjustment of classification; 11 CSR 75-13.080; 6/3/02

classification; 11 CSR 75-13.010; 6/3/02

cause to discipline; 11 CSR 75-13.090; 6/3/02

exam; 11 CSR 75-13.050; 6/3/02

expired, relicensing; 11 CSR 75-13.040; 6/3/02

new license; 11 CSR 75-13.020; 6/3/02

notification of change in status; 11 CSR 75-13.100; 6/3/02

point scale; 11 CSR 75-13.060; 6/3/02

procedure to upgrade; 11 CSR 75-13.030; 6/3/02

recognition of federal, military, out-of-state basic training;  
11 CSR 75-13.070; 6/3/02

peace officer, reserve officer

peace officer, reserve officer; 11 CSR 75-6.010; 6/3/02

trainee attendance, performance; 11 CSR 75-6.020; 6/3/02

suspension, revocation; 11 CSR 75-3.080; 6/3/02

sheriff's department, training

attendance; 11 CSR 75-8.020; 6/3/02

requirements for; 11 CSR 75-8.030; 6/3/02

St. Louis deputies; 11 CSR 75-8.010; 6/3/02

training centers

applications; 11 CSR 75-5.030; 6/3/02

directors, coordinators; 11 CSR 75-5.020; 6/3/02

establishment of; 11 CSR 75-5.010; 6/3/02

requirements, procedures; 11 CSR 75-5.040; 6/3/02

training centers, basic

certification of courses; 11 CSR 75-14.040; 6/3/02

curricula, objectives; 11 CSR 75-14.030; 6/3/02

eligibility for entrance; 11 CSR 75-14.060; 6/3/02

instructors

licenses; 11 CSR 75-14.070; 6/3/02

requirements; 11 CSR 75-14.080; 6/3/02

procedures to obtain a license; 11 CSR 75-14.010; 6/3/02

requirements, minimum; 11 CSR 75-14.020; 6/3/02

standards for a course; 11 CSR 75-14.050; 6/3/02

waivers; 11 CSR 75-3.050; 6/3/02

**PERFUSIONISTS, LICENSING OF CLINICAL**

fees; 4 CSR 150-8.060; 6/3/02

**PERSONNEL ADVISORY BOARD**

leaves of absence; 1 CSR 20-5.020; 6/3/02

**PETROLEUM STORAGE TANK INSURANCE FUND**

aboveground storage tanks; 10 CSR 100-4.020; 12/17/01, 4/1/02

assessment of transport fee; 10 CSR 100-3.010; 12/17/01, 4/1/02

claims for cleanup costs; 10 CSR 100-5.010; 12/17/01, 4/1/02

underground storage tanks; 10 CSR 100-4.010; 12/17/01, 4/1/02

**PHARMACY PROGRAM**

drug prior authorization, list of

drugs excluded from coverage; 13 CSR 70-20.032; 7/15/02

excludable drugs; 13 CSR 70-20.031; 7/15/02

new drug entities or dosage form; 13 CSR 70-20.250;  
6/17/02, 7/1/02

non-excludable drugs; 13 CSR 70-20.034; 7/15/02

process; 13 CSR 70-20.200; 6/17/02, 7/1/02

reimbursement allowance; 13 CSR 70-20.320; 7/15/02

**PHARMACY, STATE BOARD OF**

permits; 4 CSR 220-2.020; 1/2/01, 5/1/02

prescriptions

electronic transmission; 4 CSR 220-2.085; 12/17/01

return, reuse of drugs/devices; 4 CSR 220-3.040; 5/15/02

standards of operation

Class J, shared services; 4 CSR 220-2.650; 1/2/02, 5/1/02

**PHYSICIAN ASSISTANTS**

fees; 4 CSR 150-7.200; 6/3/02

**PHYSICIAN LOAN AND TRAINING PROGRAMS**

health, professional student loan repayment; 19 CSR 10-3.030;  
5/15/02

**PHYSICIANS AND SURGEONS**

application; 4 CSR 150-2.040; 6/3/02

fees; 4 CSR 150-2.080; 5/15/02

license

limited; 4 CSR 150-2.155; 6/3/02

reciprocity; 4 CSR 150-2.030; 6/3/02

temporary; 4 CSR 150-2.060; 6/3/02

**PODIATRIC MEDICINE, STATE BOARD OF**

public records; 4 CSR 230-2.045; 12/3/01, 3/15/02

**POLICE COMMISSIONERS, ST. LOUIS BOARD OF**

administration, command; 17 CSR 20-2.015; 10/15/01, 3/15/02,  
7/1/02

authority; 17 CSR 20-2.065; 10/15/01, 3/15/02, 7/1/02

complaint/disciplinary procedures; 17 CSR 20-2.125; 10/15/01,  
3/15/02, 7/1/02

definitions; 17 CSR 20-2.025; 10/15/01, 3/15/02, 7/1/02

drug testing; 17 CSR 20-2.135; 10/15/01, 3/15/02, 7/1/02

duties; 17 CSR 20-2.075; 10/15/01, 3/15/02, 7/1/02

equipment; 17 CSR 20-2.095; 10/15/01, 3/15/02, 7/1/02

field inspection; 17 CSR 20-2.115; 10/15/01, 3/15/02, 7/1/02

licensing; 17 CSR 20-2.035; 10/15/01, 3/15/02, 7/1/02

personnel records, fees; 17 CSR 20-2.045; 10/15/01, 3/15/02,  
7/1/02

training; 17 CSR 20-2.055; 10/15/01, 3/15/02, 7/1/02

uniforms; 17 CSR 20-2.085; 10/15/01, 3/15/02, 7/1/02  
weapons; 17 CSR 20-2.105; 10/15/01, 3/15/02, 7/1/02

#### **PRESCRIPTION DRUGS, SENIOR RX PROGRAM**

agent, authorized; 19 CSR 90-1.060; 2/15/02, 7/1/02  
appeal process; 19 CSR 90-1.090; 2/15/02, 7/1/02  
claimant's responsibilities; 19 CSR 90-1.040; 2/15/02, 7/1/02  
definitions; 19 CSR 90-1.010; 2/15/02, 7/1/02  
eligibility, application process; 19 CSR 90-1.020; 2/15/02, 7/1/02  
identification card; 19 CSR 90-1.070; 2/15/02, 7/1/02  
payment provisions; 19 CSR 90-1.030; 2/15/02, 7/1/02  
pharmacies, participating  
    appeal process; 19 CSR 90-2.050; 2/15/02, 7/1/02  
    definitions; 19 CSR 90-2.010; 2/15/02, 7/1/02  
    eligibility, application process; 19 CSR 90-2.020; 2/15/02, 7/1/02  
    responsibilities; 19 CSR 90-2.030; 2/15/02, 7/1/02  
    termination, suspension; 19 CSR 90-2.040; 2/15/02, 7/1/02  
rebate program, manufacturers; 19 CSR 90-3.010; 3/1/02,  
reenrollment; 19 CSR 90-1.050; 2/15/02, 7/1/02  
termination; 19 CSR 90-1.080; 2/15/02, 7/1/02

#### **PUBLIC DEFENDER COMMISSION**

definitions; 18 CSR 10-2.010; 3/15/02, 7/15/02  
indigency guidelines; 18 CSR 10-3.010; 3/15/02, 7/15/02  
organization; 18 CSR 10-1.010; 3/15/02, 7/15/02

#### **PUBLIC SERVICE COMMISSION**

cold weather rule; 4 CSR 240-13.055; 12/3/01  
contested cases; 4 CSR 240-2.117; 5/1/02  
disposition of contested cases; 4 CSR 240-2.117; 1/16/02, 3/1/02  
electronic filing; 4 CSR 240-2.045; 1/16/02, 4/1/02  
evidence; 4 CSR 240-2.130; 10/15/01, 3/15/02  
intervention; 4 CSR 240-2.075; 1/16/02, 3/1/02, 5/1/02  
    monthly reports; 4 CSR 240-120.130; 7/2/01  
pleadings, filing, service; 4 CSR 240-2.080; 10/15/01, 3/15/02, 7/1/02  
stipulations agreements; 4 CSR 240-2.115; 1/16/02, 3/1/02, 5/1/02  
telephone corporations, reporting  
    definitions; 4 CSR 240-35.010; 9/4/01, 2/1/02  
    provisions; 4 CSR 240-35.020; 9/4/01, 2/1/02  
    reporting of bypass, customer specific arrangements;  
        4 CSR 240-35.030; 9/4/01, 2/1/02  
utilities, income; 4 CSR 240-10.020; 9/4/01, 2/1/02

#### **PURCHASING AND MATERIALS MANAGEMENT**

waiver of bidding procedures; 1 CSR 40-1.090; 7/1/02

#### **REAL ESTATE COMMISSION**

application, license fees; 4 CSR 250-5.020; 11/1/01, 2/15/02

#### **RECORDS MANAGEMENT**

grants, local records; 15 CSR 30-45.030; 3/1/02, 6/17/02

#### **RESPIRATORY CARE, MISSOURI BOARD FOR**

application; 4 CSR 255-2.010; 12/17/01, 5/1/02  
educational permit; 4 CSR 255-2.030; 12/17/01, 5/1/02  
inactive status; 4 CSR 255-2.050; 5/15/02  
reinstatement; 4 CSR 255-2.060; 5/15/02  
temporary permit; 4 CSR 255-2.020; 12/17/01, 5/1/02

#### **RETIREMENT SYSTEMS**

county employees' defined contribution plan  
    accounts of participants; 16 CSR 50-10.040; 6/3/02  
    contributions; 16 CSR 50-10.030; 6/3/02  
    definitions; 16 CSR 50-10.010; 6/3/02

distribution of accounts; 16 CSR 50-10.050; 6/3/02  
vesting and service; 16 CSR 50-10.070; 6/3/02  
county employees' deferred compensation plan  
    death benefits; 16 CSR 50-20.080; 6/3/02  
    distribution of accounts; 16 CSR 50-20.070; 6/3/02  
    limitations on deferral; 16 CSR 50-20.050; 6/3/02  
    participation in plan; 16 CSR 50-20.030; 6/3/02  
local government employees  
    hearings and proceedings; 16 CSR 20-3.010; 12/3/01, 4/1/02  
    lump-sum cash payout; 16 CSR 20-2.056; 12/3/01, 4/1/02  
    reemployment in LAGERS; 16 CSR 20-2.083; 12/3/01, 4/1/02  
nonteacher school employee  
    membership service credit; 16 CSR 10-6.040; 3/15/02, 6/17/02  
public school retirement system  
    reinstatement, credit purchases; 16 CSR 10-4.014; 3/15/02, 6/17/02  
stipulations, agreements; 4 CSR 240-2.115; 1/16/02

#### **SECURITIES, DIVISION OF**

affidavit, individual; 15 CSR 30-50.180; 1/16/02, 6/17/02  
agricultural cooperative association; 15 CSR 30-54.190; 12/3/01, 5/15/02  
answers and supplementary pleadings; 15 CSR 30-55.030; 12/3/01, 4/1/02  
application  
    agent; 15 CSR 30-50.120; 1/16/02, 6/17/02  
    qualification; 15 CSR 30-50.150; 1/16/02, 6/17/02  
    registration; 15 CSR 30-51.020; 1/16/02, 6/17/02  
    sellers of agricultural cooperative; 15 CSR 30-50.220; 1/16/02, 6/17/02  
briefs; 15 CSR 30-55.110; 12/3/01, 4/1/02  
claim for exemption of cooperative association; 15 CSR 30-50.210; 1/16/02, 6/17/02  
definitions; 15 CSR 30-50.010; 1/16/02, 6/17/02  
discovery; 15 CSR 30-55.080; 12/3/01, 4/1/02  
examination; 15 CSR 30-51.030; 1/16/02, 6/17/02  
exclusions from definitions; 15 CSR 30-51.180; 2/1/02, 6/17/02  
fees; 15 CSR 30-50.030; 1/16/02, 6/17/02  
financial condition; 15 CSR 30-50.170; 1/16/02, 6/17/02  
forms; 15 CSR 30-50.040; 1/16/02, 6/17/02  
general; 15 CSR 30-51.010; 1/16/02, 6/17/02  
instituting hearing before commissioner; 15 CSR 30-55.020; 12/3/01, 4/1/02  
instructions; 15 CSR 30-50.020; 1/16/02, 6/17/02  
investment company report of sales; 15 CSR 30-50.160; 1/16/02, 6/17/02  
motions, suggestions, legal briefs; 15 CSR 30-55.110; 12/3/01, 4/1/02  
notice of hearing; 15 CSR 30-55.040; 12/3/01, 4/1/02  
officers; 15 CSR 30-55.220; 12/3/01, 4/1/02  
prehearing  
    conferences; 15 CSR 30-55.050; 12/3/01, 4/1/02  
    procedures; 15 CSR 30-55.025; 12/3/01, 4/1/02  
procedure and evidence; 15 CSR 30-55.090; 12/3/01, 4/1/02  
registration by notification; 15 CSR 30-50.130; 1/16/02, 6/17/02  
record of hearing; 15 CSR 30-55.070; 12/3/01, 4/1/02  
requirements; 15 CSR 30-51.160; 1/16/02, 6/17/02  
trading exemptions; 15 CSR 30-54.290; 2/1/02, 6/17/02  
who may request; 15 CSR 30-55.010; 12/3/01, 4/1/02

#### **SENIOR SERVICES, DIVISION OF**

in-home service standards; 19 CSR 15-7.021; 10/15/01, 3/15/02

#### **SOIL AND WATER DISTRICTS COMMISSION**

organization; 10 CSR 70-1.010; 2/1/02, 7/1/02  
annual rate of interest; 12 CSR 10-41.010; 12/3/01, 3/15/02



**SPEECH-LANGUAGE PATHOLOGISTS AND AUDIOLOGISTS**

applications; 4 CSR 150-4.010; 6/3/02  
fees; 4 CSR 150-4.060; 6/3/02

**TAX**

power of attorney; 12 CSR 10-41.030; 2/15/02, 6/3/02

**TAX, INCOME**

accounting methods; 12 CSR 10-2.040; 5/15/02  
agricultural unemployed person; 12 CSR 10-2.175; 5/15/02  
credit carryback; 12 CSR 10-2.145; 5/15/02  
employers' withholding; 12 CSR 10-2.015; 5/1/02  
failure to pay; 12 CSR 10-2.065; 5/15/02  
net operating losses; 12 CSR 10-2.165; 2/15/02, 6/3/02  
questions, answers; 12 CSR 10-2.005; 5/15/02

**TAX, INHERITANCE AND ESTATE**

appraisers  
duties; 12 CSR 10-8.080; 5/1/02  
errors in report, exceptions; 12 CSR 10-8.090; 5/1/02  
report; 12 CSR 10-8.100; 5/1/02  
encroachment; 12 CSR 10-8.130; 5/1/02  
homestead allowance; 12 CSR 10-8.040; 5/1/02  
interest; 12 CSR 10-8.050; 5/1/02  
mortality table; 12 CSR 10-8.150; 5/1/02  
payment of tax, receipt, refund; 12 CSR 10-8.060; 5/1/02  
probate court to determine; 12 CSR 10-8.070; 5/1/02  
refund; 12 CSR 10-8.140; 5/1/02  
valuation, methods, mortality table; 12 CSR 10-8.110; 5/1/02

**TAX, SALES/USE**

common carriers; 12 CSR 10-3.300; 5/15/02  
component parts; 12 CSR 10-3.294; 5/15/02  
concessionaires; 12 CSR 10-3.042; 5/1/02  
dual operators; 12 CSR 10-3.031; 5/1/02  
exempt agency; 12 CSR 10-3.245; 5/15/02  
export sales; 12 CSR 10-3.233; 5/1/02  
homes, modular or sectional; 12 CSR 10-3.034; 5/1/02  
information required; 12 CSR 10-3.247; 5/15/02  
ingredients; 12 CSR 10-3.292; 5/15/02  
labor or service rendered; 12 CSR 10-3.044; 5/1/02  
local sales/use tax applicable; 12 CSR 10-117.100; 2/15/02, 6/3/02  
manufacturers, wholesalers; 12 CSR 10-3.008; 5/1/02  
meal ticket; 12 CSR 10-3.240; 5/15/02  
personal property, lease or rental; 12 CSR 10-108.700; 5/1/02  
separate transactions; 12 CSR 10-3.179; 5/1/02  
petty cash funds; 12 CSR 10-3.258; 5/15/02  
physicians, dentists, optometrists; 12 CSR 10-103.395; 5/1/02  
printers, commercial; 12 CSR 10-111.100; 11/15/01, 3/15/02  
redemption of coupons; 12 CSR 10-3.144; 5/1/02  
refunds, credits; 12 CSR 10-102.016; 5/1/02  
sale on installed basis; 12 CSR 10-3.158; 5/1/02  
sales subject to sales/use tax; 12 CSR 10-113.200; 2/15/02, 6/3/02  
sales to Missouri; 12 CSR 10-3.250; 5/15/02  
other than political subdivisions; 12 CSR 10-3.256; 5/15/02  
political subdivisions; 12 CSR 10-3.254; 5/15/02  
service station ownership; 12 CSR 10-3.116; 5/1/02

**TAX, STATE COMMISSION**

agricultural land productive value; 12 CSR 30-4.010; 2/1/02  
appeals from local board; 12 CSR 30-3.010; 7/15/02

**TOBACCO**

retailer employee training; 11 CSR 70-3.010; 11/1/01, 2/15/02  
sting operations; 11 CSR 70-3.020; 11/1/01, 2/15/02

**TOURIST ORIENTED DIRECTIONAL SIGNS**

activities, eligibility; 7 CSR 10-22.040; 11/15/01, 3/15/02  
definitions; 7 CSR 10-22.020; 11/15/01, 3/15/02

**TRAVEL REGULATIONS**

reimbursement; 1 CSR 10-11.010; 7/15/02

**TREASURER, OFFICE OF THE**

interest rate, linked deposit, loan categories; 15 CSR 50-2.050;  
12/17/01, 4/1/02

**TUBERCULOSIS TESTING**

fees, laboratory; 19 CSR 25-38.020; 3/1/02, 7/1/02

**WEIGHTS AND MEASURES**

inspection procedures; 2 CSR 90-23.010; 3/15/02  
installation requirements; 2 CSR 90-10.013; 1/2/02, 5/15/02  
manufactured homes; 2 CSR 90-10.017; 1/2/02  
National Fuel Gas Code; 2 CSR 90-10.020; 1/2/02, 5/15/02  
packaging and labeling; 2 CSR 90-22.140; 3/15/02  
price verification; 2 CSR 90-25.010; 3/15/02  
propane, overfill prevention devices; 2 CSR 90-10.040; 7/15/02  
registration, training; 2 CSR 90-10.012; 1/2/02, 5/15/02  
sale of commodities; 2 CSR 90-20.040; 3/15/02  
storage and handling; 2 CSR 90-10.040; 1/2/02, 5/15/02

**WORKERS' COMPENSATION**

tort victims; 8 CSR 50-8.010; 2/15/02, 7/1/02  
review of decisions; 8 CSR 20-8.010; 3/1/02, 6/17/02

# Keep Your Copies of the *Missouri Register* Organized in Easy-To-Use Binders



MATT BLUNT  
SECRETARY OF STATE  
MISSOURI  
REGISTER

**\$7.50** each

Requires two binders per volume.

## ORDER FORM

☐ Enclosed is my check for \$ \_\_\_\_\_ for \_\_\_\_\_ *Missouri Register* Binders.  
(\$.750 for each binder) (No. of binders)

Make checks payable to Director of Revenue.

Mail to: MATT BLUNT  
SECRETARY OF STATE  
ADMINISTRATIVE RULES DIVISION  
PO Box 1767  
JEFFERSON CITY, MO 65102

\_\_\_\_\_  
Name or Firm (Please Type or Print)

\_\_\_\_\_  
Attn:

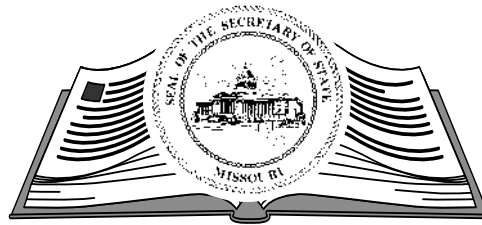
\_\_\_\_\_  
Send by UPS or Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

The *official*  
source of  
information on  
Missouri state  
regulations



PUBLISHED SEMI-MONTHLY — \$56<sup>00</sup> PER YEAR

**ORDER FORM**

- ☐ Enclosed is my check for \$56 as payment in advance for one year of the *Missouri Register*  
Please start my subscription with the \_\_\_\_\_ issue.
- ☐ Enclosed is my check for \$330 for the *Code of State Regulations*
- ☐ This is a subscription renewal

Please make checks payable to: **Director of Revenue**

Mail to: MATT BLUNT  
SECRETARY OF STATE  
ADMINISTRATIVE RULES DIVISION  
PO BOX 1767  
JEFFERSON CITY, MO 65102

\_\_\_\_\_  
name or firm (please type or print)

\_\_\_\_\_  
attn:

\_\_\_\_\_  
PO box number

\_\_\_\_\_  
street address

\_\_\_\_\_  
city

\_\_\_\_\_  
state

\_\_\_\_\_  
zip

# **Rulemaking Tip # 8**

**Revising your rules?  
Call us for the electronic copy—  
we will e-mail it to you!**

**Office of the Secretary of State**

**MATT BLUNT**

7/15/02

---

**MATT BLUNT**  
SECRETARY OF STATE  
PO Box 1767  
JEFFERSON CITY, MO 65102

Periodical Postage Paid at Jefferson City, MO
--